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ABSTRACT

The hearing before the Subcommittee on Select Education of the Committee on Education and Labor focuses upon the proposed extension of the Alcohol and Drug Abuse Education Act. Testimony is heard from professors, principals, superintendents, and other professionals involved in the field of substance abuse education. The act itself and applicable regulations issued by the Department of Health, Education, and Welfare are included. (KA)

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ED163340

EXTENSION OF THE ALCOHOL AND DRUG ABUSE EDUCATION ACT

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HEARING

BEFORE THE

SUBCOMMITTEE ON SELECT EDUCATION

OF THE

COMMITTEE ON EDUCATION AND LABOR

HOUSE OF REPRESENTATIVES

NINETY-FIFTH CONGRESS

SECOND SESSION

HEARING HELD IN WASHINGTON, D.C. ON
JANUARY 24, 1978

Printed for the use of the Committee on Education and Labor
CARL D. PERKINS, *Chairman*

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
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EXTENSION OF THE ALCOHOL AND DRUG ABUSE EDUCATION ACT

TUESDAY, JANUARY 24, 1978

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON SELECT EDUCATION,
COMMITTEE ON EDUCATION AND LABOR,
Washington, D.C.

The subcommittee met at 9:30 a.m., in room H-328, the Capitol, Hon. John Brademas (chairman of the subcommittee) presiding.

Members present: Representatives Brademas, Biaggi, Jeffords, and Pressler.

Mr. BRADEMAS. The Subcommittee on Select Education of the Committee on Education and Labor will come to order for the purpose of receiving testimony on the proposed extension of the Alcohol and Drug Abuse Education Act.

Without objection, at this point in the record I would like to insert the Alcohol and Drug Abuse Education Act and the applicable regulations issued by the Department of Health, Education, and Welfare.

[The material referred to follows:]

ALCOHOL AND DRUG ABUSE EDUCATION ACT

AN ACT To authorize the Secretary of Health, Education, and Welfare to make grants to conduct special educational programs and activities concerning the use of drugs and other related educational purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SHORT TITLE

SECTION 1. This Act may be cited as the "Alcohol and Drug Abuse Education Act."

STATEMENT OF PURPOSE

SEC. 2. (a) The Congress hereby finds and declares that drug and alcohol abuse diminishes the strength and vitality of the people of our Nation; that an increasing number of substances, both legal and illegal, are being abused by increasing numbers of individuals; that abuse of any substance is complex human behavior which is influenced by many forces, including school, family, church, community, media, and peer groups; and that prevention and early intervention in such behavior require cooperation and coordination among all of these elements in strategies designed to respond to carefully defined problems.

(b) It is the purpose of this Act to encourage the development of new and improved curricula on the problems of drug abuse; to demonstrate the use of such curricula in model educational programs and to evaluate the effectiveness thereof; to disseminate curricular materials and significant information for use in educational programs throughout the Nation; to provide training programs for teachers, counselors, law enforcement officials and other public service and community leaders; and to offer community education programs for parents and others, on drug abuse problems.

(c) It is further the purpose of this Act to provide leadership to schools and other institutions in the community by supporting projects to identify, evaluate, demonstrate, and disseminate effective strategies for prevention and early intervention and to provide training and technical assistance to schools and other segments of the community in adapting such strategies to identified local needs.

(20 U.S.C. 1001) Enacted Dec. 3, 1970, P.L. 91-527, sec. 2, Stat. 1385; amended Sept. 21, 1974, P.L. 93-422, sec. 2, 88 Stat. 1154.

ALCOHOL AND DRUG ABUSE EDUCATION PROJECTS

SEC. 3. (a) The Commissioner of Education shall carry out a program of making grants to, and contracts with institutions of higher education, State and local educational agencies, and public and private education or community agencies, institutions, and organizations to support and evaluate demonstration projects, to encourage the establishment of such projects throughout the Nation, to train educational and community personnel, and to provide technical assistance in program development. In carrying out such program, the Commissioner of Education shall give priority to school based programs and projects.

(b) Funds appropriated for grants and contracts under this Act shall be available for activities, including bilingual activities, such as—

(1) projects for the development, testing evaluation, and dissemination of exemplary materials for use in elementary, secondary, adult, and community education programs, and for training in the selection and use of such materials;

(2) comprehensive demonstration programs which focus on the causes of drug and alcohol abuse rather than on the symptoms; which include both schools and the communities within which the schools are located; which emphasizes the affective as well as the cognitive approach; which reflect the specialized needs of communities; and which include, in planning and development, school personnel, the target population, community representation, and parents;

(3) creative primary prevention and early intervention programs in schools, utilizing an interdisciplinary "school team" approach, developing in educational personnel and student skills in planning and conducting comprehensive prevention programs which include such activities as training drug and alcohol education specialists and group leaders, peer group and individual counseling, and student involvement in intellectual, cultural, and social alternatives to drug and alcohol abuse;

(4) preservice and inservice training programs on drug and alcohol abuse prevention for teachers, counselors, and other educational personnel, law enforcement officials, and other public service and community leaders and personnel;

(5) community education programs on drug and alcohol abuse, especially for parents and others in the community;

(6) programs or projects to recruit, train, organize, and employ professionals and other persons, including former drug and alcohol abusers and former drug- and alcohol-dependent persons, to organize and participate in programs of public education in drug and alcohol abuse; and

(7) projects for the dissemination of valid and effective school and community drug and alcohol abuse educational programs.

(c) In addition to the purposes described in subsection (b) of this section, funds in an amount not to exceed 10 per centum of the sums appropriated to carry out this Act may be made available for the payment of reasonable and necessary expenses of State educational agencies for assisting local educational agencies in the planning, development, and implementation of drug and alcohol abuse education programs, including such projects as—

(1) inservice training of education personnel,

(2) technical assistance to local school districts,

(3) creative leadership in programing for indigenous minorities, and

(4) training of peer counselors.

(d)(1) Financial assistance under this section may be made only upon application at such time or times, in such manner, and containing or accompanied by such information as the Commissioner deems necessary, and only if such application—

(A) provides that activities and services for which assistance under this title is sought will be administered by or under the supervision of the applicant;

(B) provides for carrying out one or more projects or programs eligible for assistance under subsections (b) and (c) of this section and provides for such methods of administration as are necessary for the proper and efficient operation of such projects or programs;

(C) sets forth policies and procedures which assure that Federal funds made available under this section for any fiscal year will be so used as to supplement and, to the extent practical, increase the level of funds that would,

in the absence of such Federal funds, be made available by the applicant for the purposes described in subsections (b) and (c) of this section, and in no case supplant such funds; and

(D) provides for making such reports, in such form and containing such information, as the Commissioner may reasonably require, and for keeping such records and affording such access thereto as the Commissioner may find necessary to assure to correctness and verification of such reports.

(2) An application from a local education agency for financial assistance under this section may be approved by the Commissioner only after the applicant has submitted the application to the State educational agency. The State educational agency shall, not more than thirty days after the date of receipt of the application, submit to the Secretary in writing its comments on the application. A copy of such comments shall be submitted at the same time to the applicant.

(3) Amendments of applications shall, except as the Commissioner may otherwise provide by or pursuant to regulation, be subject to the requirements set forth in subsections (d)(1) and (d)(2).

(e)(1) The Commissioner may use funds in an amount not exceeding 1 per centum of the funds appropriated to carry out this section for a fiscal year for independent analysis and evaluation of the effectiveness of the drug and alcohol abuse education programs assisted under this section.

(2) The Commissioner shall, not later than March 31 of each calendar year, submit an evaluation report to the House and Senate Committees on Appropriations, the House Committee on Education and Labor, and the Senate Committee on Labor and Public Welfare. Such report shall—

(A) contain the agency's statement of specific and detailed objectives for the program or programs assisted under the provisions of this Act, and relate these objectives to those in the Act,

(B) include statements of the agency's conclusions as to effectiveness of the program or programs in meeting the stated objectives, measured through the end of the preceding fiscal year,

(C) make recommendations with respect to any changes or additional legislative action deemed necessary or desirable in carrying out the program or programs,

(D) contain a listing identifying the principal analyses and studies supporting the major conclusions and recommendations, and

(E) contain the agency's annual evaluation plan for the program or programs through the ensuing fiscal year for which the budget was transmitted to Congress by the President, in accordance with section 201(a) of the Budget and Accounting Act of 1921 (31 U.S.C. 11).

(f) There are authorized to be appropriated to carry out the purposes of this section $26,000,000 for the fiscal year ending June 30, 1975, $30,000,000 for the fiscal year ending June 30, 1976, and $34,000,000 for the fiscal year ending June 30, 1977. Not less than 60 per centum of the amount appropriated for a fiscal year under this section shall be used for drug and alcohol abuse education programs and projects in elementary and secondary schools.

(20 U.S.C. 1092) Enacted Dec. 3, 1970, P.L. 91-527, sec. 3, Stat. 1396; amended Sept. 21, 1974, P.L. 93-422, 88 Stat. 1155.

COMMUNITY EDUCATION PROJECTS

SEC. 4. (a) Each recipient of Federal assistance under this Act, pursuant to grants, subgrants, contracts, subcontracts, loans, or other arrangements, entered into other than by formal advertising, and which are otherwise authorized by this Act, shall keep such records as the Commissioner shall prescribe, including records which fully disclose the amount and disposition by such recipient of the proceeds of such assistance, the total cost of the project or undertaking in connection with which such assistance is given or used, the amount of that portion of the cost of the project or undertaking supplied by other sources, and such other records as will facilitate an effective audit.

(b) The Secretary and the Comptroller General of the United States or any of their duly authorized representatives, shall, until the expiration of three years after completion of the project or undertaking referred to in subsection (a) of this section, have access for the purpose of audit and examination to any books, documents, papers and records of such projects which in the opinion of the Secretary or the Comptroller General may be related or pertinent to the grants, subgrants, contracts, subcontracts, loans, or other arrangements referred to in subsection (a).

(20) U.S.C. 1003) Enacted Dec. 3, 1970, P.L. 91-527, sec. 4, 84 Stat. 1387; amended Sept. 21, 1974, P.L. 93-422, 88 Stat. 1157.

TECHNICAL ASSISTANCE

SEC. 5. The Secretary and the Attorney General (on matters of law enforcement) shall, when requested, render technical assistance to local educational agencies, public and private nonprofit organizations, and institutions of higher education in the development and implementation of programs of drug and alcohol abuse education. Such technical assistance may, among other activities, include making available to such agencies or institutions information regarding effective methods of coping with problems of drug and alcohol abuse, and making available to such agencies or institutions personnel of the Department of Health, Education, and Welfare and the Department of Justice, or other persons qualified to advise and assist in coping with such problems or carrying out a drug and alcohol abuse education programs.

(20 U.S.C. 1004) Enacted Dec. 3, 1970, P.L. 91-527, sec. 5, 84 Stat. 1388; amended Sept. 21, 1974, P.L. 93-422, 88 Stat. 1157.

PAYMENTS

SEC. 6. Payments under this Act may be made in installments and in advance or by way of reimbursement, with necessary adjustments on account of overpayments or underpayments.

(20 U.S.C. 1005) Enacted Dec. 3, 1970, P.L. 91-527, sec. 6, 84 Stat. 1388.

ADMINISTRATION

SEC. 7. In administering the provisions of this Act, the Secretary is authorized to utilize the services and facilities of any agency of the Federal Government and of any other public or private agency or institution in accordance with appropriate agreements, and to pay for such services either in advance or by way of reimbursement, as may be agreed upon.

(20 U.S.C. 1006) Enacted Dec. 3, 1970, P.L. 91-527, sec. 7, 84 Stat. 1388.

DEFINITIONS

SEC. 8. As used in this Act—

(a) The term "Secretary" means the Secretary of Health, Education, and Welfare.

(b) The term "Commissioner" means the Commissioner of Education.

(c) The term "State" includes, in addition to the several States of the Union, the Commonwealth of Puerto Rico, the District of Columbia, Guam, American Samoa, the Virgin Islands, and the Trust Territory of the Pacific Islands.

(20 U.S.C. 1007) Enacted Dec. 3, 1970, P.L. 91-527, sec. 7, 84 Stat. 1388; amended Sept. 21, 1974, P.L. 93-422, 88 Stat. 1157.

[From the Federal Register, Oct. 27, 1976]

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF EDUCATION

NATIONAL ALCOHOL AND DRUG ABUSE PREVENTION PROGRAM

TITLE 45—PUBLIC WELFARE

CHAPTER I—OFFICE OF EDUCATION, DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PART 182a—NATIONAL ALCOHOL AND DRUG ABUSE PREVENTION PROGRAM

A notice of proposed rulemaking was published on May 18, 1976, at 41 FR 20416, inviting public comments on proposed regulations of the Secretary of Health, Education, and Welfare, prescribing certain policies and requirements with respect to carrying out programs for the prevention of and early intervention in alcohol and drug abuse under the Alcohol and Drug Abuse Education Act, Pub. L. 93-422 (21 U.S.C. 1001-1007).

The Office of Education, under the National Alcohol and Drug Abuse Prevention Program, will make funds available to local public and private educational agencies and community-based public and private nonprofit agencies, institutions,

and organizations to defray the cost of teams attending regional training centers to learn how to develop and administer alcohol and drug abuse prevention and early intervention programs. After training at the regional training centers (supported by the U.S. Office of Education), the teams will return to their respective schools and communities to carry our programs to meet local needs.

The development of the National Alcohol and Drug Abuse Prevention Program has benefitted from public participation in the decision making process. State and local education personnel, community representatives, the National Action Committee for Drug Education and other professionals in the area of alcohol and drug abuse prevention have assisted in molding the basic concept of school and community team training and have participated in the implementation of the program's objectives.

Also, interested persons have been afforded an opportunity to participate in the development of these regulations by submitting comments, suggestions and criticisms on the notice of proposed rulemaking and due consideration has been given to all the written comments received. After the summary of each comment below, a response is set forth stating the changes which have been made in the regulations or the reasons why no change is deemed appropriate.

COMMENTS

Several commenters objected to the fact that the single State agencies, established pursuant to section 490(e)(1) of Pub. L. 92–255 (Drug Abuse Office and Treatment Act of 1972), have been given no voice in the selection of teams of educational personnel to participate in training programs. These commenters have suggested that applications for the grants should be reviewed by the single State alcohol and drug authorities because these agencies provide for coordination of drug prevention projects. Since single State Agencies often implement and fund school and community prevention programs, the Office of Education should require coordination with single State agencies in order to avoid duplication of effort.

RESPONSE

These comments have not been adopted. In the first place, there is no statutory provision in the Alcohol and Drug Abuse Education Act (Pub. L. 93–422) which requires the submission of applications to the single State agencies established pursuant to section 490(e) (1) of the Drug Abuse Office and Treatment Act of 72 (Pub. L. 92–255). Secondly, although section 490 of Pub. L. 92–255 provides formula grants to states for drug abuse prevention programs, the House Committee on Education and Labor found that the major emphasis has been on treatment and rehabilitation, not on education programs. In addition, the Committee expressed concern that the overall efforts on drug abuse prevention education programs on the part of the Special Action Office for Drug Abuse Prevention and the National Institute of Mental Health were greatly limited. In order to stimulate primary prevention education programs, Congress concluded that the effective implementation of alcohol and drug abuse education activities must be directed by the U.S. Office of Education's Office of Alcohol and Drug Abuse Education. "Because it is administered by the Office of Education, the program has credibility with State and local education agencies." (House Report No. 93–605 to accompany H.R. 9456 Page 2, October 23, 1973). Therefore, instead of requiring applicants to submit comments through the single State Agency, section 3(d)(2) of Pub. L. 93–422 (21 U.S.C. 1002) requires applications from local educational agencies to be submitted to the State educational agency for comment. This requirement is set forth in § 182a.13(d) of the regulations. Although no change has been made in the regulations, the Office of Education's Office of Alcohol and Drug Abuse Education encourages local educational agencies to send copies of the application to the single State agencies. The single State agencies, in turn, are encouraged to submit their comments to the Office of Education.

COMMENT

Several commenters requested that additional monies be provided after training in order to implement the activities in both the schools and the communities. These commenters suggested that minigrants for the school and community program would not be sufficient to make a significant impact. Unless additional funds were made available, some local community groups would be unable to absorb the cost of the program because municipal governments, in many instances, are reducing and eliminating alcohol and drug abuse programs as well as other previously existing public and private services.

RESPONSE

No change has been made in the regulations. The express purpose of the school-based and community program, as set forth in §§ 182a.11 and 182a.21 of the regulations is to provide leadership training to teams in order that they might develop and implement effective programs. Due to the limited appropriation for this activity, there are no funds available to support the implementation of the program after the teams return to their respective school and communities. One facet of the training program, however, includes instruction on how teams may successfully secure additional resources to operate programs. For example, formula grants are available through the single State agencies.

COMMENT

A commenter suggested that the less costly and more prudent approach to effective impact prevention would be to train health or treatment professionals in the health service fields. Without a nucleus of competent health trainers, the prospects for significant success is limited. This commenter also recommended that serious attention should be directed toward the provision of more graduate programs at the intermediate and advance levels for those already functioning in the field.

RESPONSE

This comment has not been adopted. The Alcohol and Drug Abuse Education Act has as its major concern, primary prevention programs for students in elementary and secondary schools of the Nation. Therefore, in carrying out activities under the Act, its primary objective is to inform, educate, train and prepare educational professionals—teachers, administrators, counselors, health educators and school nurses to plan and implement school-based programs whose goal is the prevention of destructive behavior, particularly destructive use of alcohol and drugs. It does not purport to encompass the whole field of prevention/education but rather to improve the effectiveness of schools and educational personnel in creating an environment and developing skills that will promote positive growth and prevent behavior that is destructive to self or society. The Alcohol and Drug Abuse Education Program is designed to train educational personnel to do their job better in terms of meeting the developmental needs of young people and to work more closely with other segments of the community. Other agencies within HEW are charged with the training of health or treatment specialists.

COMMENT

A commenter questioned whether Indian tribes are eligible to receive assistance under the school-based program.

RESPONSE

Parties eligible to receive funds under the school-based program are public and private educational agencies. Section 100a.1 of the General Education Provisions Regulations defines "public agency" as "a legally constituted organization of government under public administrative control and direction." Since Indian tribes have been viewed as municipalities providing governmental functions, tribes would appear to be public agencies for the purposes of the General Education Provisions Regulations. Accordingly, tribes which perform governmental type services of an educational nature, such as providing educational functions to tribal members in tribal schools, can legally be regarded as public educational agencies for the purpose of the school-based program under the Alcohol and Drug Education Act.

COMMENT

A commenter expressed concern about the emphasis on education of youngsters in schools rather than for persons of all ages and in all community settings. Not until adults in all institutions and systems are educated in the area of alcohol and drug prevention will the education of the young be assured. A failure to redirect resources to the education of adults demeans the value of education as a democratic social-change tool.

RESPONSE

No change has been made in the regulations. Section 3(a) of the governing statute (Pub. L. 93-422) provides that the Commissioner of Education shall give priority to school-based programs and projects. Therefore, the objective of the

school program (Part B) is to train and prepare educational personnel to implement effective alcohol and drug abuse prevention programs in the schools. The "Help Communities Help Themselves Program" set forth in Subpart C, however, is designed to include adult target populations.

COMMENT

A commenter objected to the exclusion of proprietary treatment programs from the school-based program because these organizations frequently devote both time and resources to educating the public about problems of alcoholism and drug abuse.

RESPONSE

No change has been made to the regulations. The complete list of organizations eligible to receive financial assistance under the alcohol and drug education program is set forth in section 3(a) of the governing statute. This enumeration does not include proprietary institutions. Furthermore, the school-based program focuses on primary prevention for students in elementary and secondary school and is not designed to cover the actual treatment of victims of alcohol and drug abuse.

OTHER CHANGES

Certain minor and technical changes were made in order to correct omissions and typographical errors printed in the proposed regulations. Several editorial changes were also made to add clarity to the regulations.

EFFECTIVE DATE

Pursuant to section 431(d) of the General Education Provisions Act, as amended (20 U.S.C. 1232(d)), these regulations have been transmitted to the Congress concurrently with the publication in the FEDERAL REGISTER. That section provides that regulations subject thereto shall become effective on the forty-fifth day following the date of such transmission, subject to the provisions therein concerning Congressional action and adjournment.

It is hereby certified that this proposal has been screened pursuant to Executive Order No. 11821, and does not require an Inflation Impact Evaluation.

(Catalog of Federal Domestic Assistance Program No. 13,420, Drug Abuse Education.)

Dated: September 8, 1976.

WILLIAM F. PIERCE,
Acting U.S. Commissioner of Education.

Approved: October 20, 1976.

DAVID MATHEWS,
Secretary of Health, Education, and Welfare.

PART 182a—NATIONAL ALCOHOL AND DRUG ABUSE PREVENTION PROGRAM

SUBPART A—GENERAL

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182a.1 Scope.
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182a.3 Technical assistance.

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182a.12 Eligible applicants.
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182a.15 Composition of teams.
182a.16 Team activities.
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SUBPART C—HELP COMMUNITIES HELP THEMSELVES PROGRAM

182a.21 Purpose
182a.22 Eligible applicants.
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182a.24 Application requirements.
182a.25 Funding criteria.
182a.26 Composition of teams.
182a.27 Team activities.
182a.28 Allowable costs.

SUBPART A—GENERAL

§ 182a.1 Scope.

(a) The Commissioner is authorized to carry out a program of making grants to and contracts with institutions of higher education, State and local educational agencies, and public and private education or community agencies, institutions, and organizations to support and evaluate demonstration projects, to encourage the establishment of these projects throughout the Nation, to train educational and community personnel, and to provide technical assistance in program development. In carrying out such a program, the Commissioner of Education will give priority to school-based programs and projects.

(b) Programs and projects authorized under this part may include:

(1) Projects for the development, testing, evaluation, and dissemination of exemplary materials for use in elementary, secondary, adult, and community education programs, and for training in the selection and use of these materials;

(2) Comprehensive demonstration programs which focus on the causes of drug and alcohol abuse rather than on the symptoms; which include both schools and the communities where the schools are located; which emphasize the affective as well as the cognitive approach; which reflect the specialized needs of communities; and which include, in planning and development, school personnel, the target population, community representation, and parents;

(3) Creative primary prevention and early intervention programs in schools, utilizing an interdisciplinary "school team" approach, developing in educational personnel and students skills in planning and conducting comprehensive prevention programs which include activities such as training drug and alcohol education specialists and group leaders, peer group and individual counseling, and student involvement in intellectual, cultural, and social alternatives to drug and alcohol abuse;

(4) Preservice and inservice training programs on drug and alcohol abuse prevention for teachers, counselors, and other educational personnel, law enforcement officials, and other public service and community leaders and personnel;

(5) Community education programs on drug and alcohol abuse, especially for parents and others in the community;

(6) Programs or projects to recruit, train, organize, and employ professionals and other persons, including former durg and alcohol abusers and former drug- and alcohol-dependent persons, to organize and participate in programs of public education in drug and alcohol abuse; and

(7) Projects for the dissemination of valid and effective school and community drug and alcohol abuse educational programs.

(c) Programs and projects authorized under this part may include bilingual activities.

(d) Assistance provided under this part is subject to applicable provisions contained in Subchapter A of this chapter (relating to fiscal, administrative, property management, recordkeeping and other matters in 45 CFR Part 100a).

(21 U.S.C. 1001–1007)

§ 182a.2 Definitions.

(a) "Community" means a group of individuals within identifiable geographic boundaries with common needs, goals, or purposes. A community may include a town, neighborhood, rural area, or a school district, college campus, or military base.

(b) "Drug" means any chemical substance which affects a person in a way as to bring about psychological, emotional, or behavioral change.

(c) "Alcohol and drug abuse education" means a broad range of concerted activities which attempt to maximize opportunities for the intellectual, emotional, psychological, and physiological development of individuals, and which involves the total educational process embracing both cognitive and affective domains, and which focus on the root causes of alcohol and drug abuse instead of the symptoms.

(d) "Prevention" means a constructive process designed to prevent physical, mental, or social impairment resulting from the use of chemical substances, and to promote personal and social growth to full human potential as a means of reducing the probability of destructive drug use.

(e) "Local educational agency" means a public board of education or other public authority legally constituted within a State for either administrative control or direction of or to perform a service function for public elementary or secondary schools in a city, county, township, school district, or other political subdivision of a State, or such combinations of school districts and counties as are recognized in a State as an administrative agency for its public elementary or secondary

schools. The term also includes any other public institution or agency having administrative control and direction of a public elementary or secondary school.

(f) "Private educational agency" means a school or schools which are controlled by other than a public authority, and which either comply with the state compulsory attendance laws or are otherwise recognized by some procedure customarily used in the State.

(21 U.S.C. 1002)

§ 182a.3 Technical assistance.

(a)(1) The Secretary will provide, if requested, technical assistance to local educational agencies, public and private nonprofit organizations, and institutions of higher education for the purpose of developing and implementing alcohol and drug abuse prevention education programs.

(2) The Attorney General will provide, if requested, technical assistance to these agencies, organizations, and institutions on matters of law enforcement in the area of alcohol and drug abuse.

(b) Technical assistance may include providing information regarding effective methods of coping with problems of alcohol and drug abuse and providing personnel of the Department of Health, Education, and Welfare, the Department of Justice, or other persons qualified to assist in coping with these problems or carrying out alcohol and drug abuse prevention education programs.

(21 U.S.C. 1004)

SUBPART B—ALCOHOL AND DRUG ABUSE PREVENTION AND EARLY INTERVENTION PROGRAM FOR ELEMENTARY AND SECONDARY SCHOOL STUDENTS AND EDUCATIONAL PERSONNEL

§ 182a.11 Scope and purpose of training.

The purpose of this subpart is to provide training and technical assistance to local public and private educational agencies to enable teams of educational personnel from these agencies to participate in training programs so that they may effectively deal with alcohol and drug abuse problems among students in grades 5 through 12; and to enable trained team members to assist in the development and implementation of alcohol and drug abuse prevention and early intervention programs. The training that these team members receive will emphasize the understanding of alcohol and drug use and abuse problems among students and approaches for dealing with these problems in a school setting, the development of communication and leadership skills, alternatives to alcohol and drugs, needs assessment and utilization of local resources, and team building. This training will be without cost to the participating teams.

(21 U.S.C. 1002)

§ 182a.12 Eligible applicants.

Local public and private educational agencies are eligible to receive funds under this subpart.

(21 U.S.C. 1002)

§ 182a.13 Application requirements.

(a) Eligible applicants shall submit applications for assistance to the regional training centers supported by the U.S. Office of Education before the closing date for such applications established annually by the Commissioner. The regional training center will evaluate the applications on the basis of the criteria set forth in § 182a.14 and will make recommendations to the Commissioner as to which applicants should be selected to receive training.

(b) Eligible applicants shall submit applications for assistance which contain the following information and other information the Commissioner may from time to time prescribe:

(1) A description of the applicant agency's size, number of students, and number of schools;

(2) A description of the community in which the applicant agency is located in terms of:

(i) Geographic size;

(ii) Whether it is urban, suburban, or rural;

(iii) Number and types of ethnic groups residing in the area;

(iv) The number of persons with limited English-speaking ability residing in the area; and

(v) Community socioeconomic profile.

(3) An assessment of the extent of the alcohol and drug abuse problem in the schools and community to be served;
(4) A description of the applicant's present alcohol and drug abuse education program;
(5) A list of the groups or organizations which will participate in the implementation of the program;
(6) A description of the team members including their current positions and experience which will enable them to carry out an alcohol and drug abuse prevention program effectively;
(7) A description of how team members will be utilized after training to develop a new or modify an existing alcohol and drug abuse prevention program; and
(8) A description of the support, both administrative and financial, which the applicant will make available to the team to facilitate its alcohol and drug abuse prevention activities after training.
(c) Applicants shall assure that:
(1) Team members will be available to participate on a team basis in the development and administration of school alcohol and drug abuse education programs in the local school district upon completion of training at the regional training centers;
(2) Reports will be submitted containing information which the Commissioner may reasonably require;
(3) Records will be maintained and made accessible to the Commissioner to assure the correctness and verification of the reports; and
(4) Federal funds made available under this subpart will be used to supplement and, to the extent practical, increase the level of funds that would, in the absence of the Federal funds, be made available by the applicant for the purposes of this program, and in no case supplant these funds.
(d) An applicant local educational agency shall submit a copy of its application to its State educational agency. The State educational agency shall, not more than thirty days after the date of receipt of the application, submit its written comments on the application to the Commissioner and to the applicant.

(21 U.S.C. 1002)

§ 182a.14 Funding criteria.

(a) In addition to the criteria set forth in 45 CFR 100a.26(b), the Commissioner will utilize the following additional criteria in evaluating applications for funds under this subpart:
(1) The extent of the alcohol and drug abuse problem in the schools and local community to be served;
(2) The extent to which team membership includes persons who have demonstrated leadership capabilities;
(3) The extent to which the proposed alcohol and drug abuse prevention and early intervention program activities of the applicant are addressing or will address unmet alcohol and drug abuse problems in the schools and local communities to be served;
(4) The extent to which alcohol and drug abuse prevention and early intervention efforts by the applicant will be coordinated with related efforts in the schools and communities served by the applicant;
(5) The degree of the applicant's commitment to support and facilitate the alcohol and drug abuse education activities of the team after training is completed as demonstrated by the applicant's stated intent to support these activities administratively and financially; and
(6) The extent and manner in which the team will be utilized after training in the development and administration of alcohol and drug abuse prevention and early intervention programs in the schools of the applicant educational agency.
(b) In the awarding of funds under this subpart, the Commissioner will take into consideration the extent to which the funds will be distributed throughout the Nation among school systems of varying characteristics such as geographic size, ethnic composition, concentration of persons with limited English-speaking ability, and socioeconomic factors in urban, suburban, and rural areas.

(21 U.S.C. 1002)

§ 182a.15 Composition of teams.

(a) Teams to receive training in alcohol and drug abuse prevention and early intervention at regional training centers supported by the U.S. Office of Education shall be composed of educational personnel including school administrators, counselors, teachers, psychologists, school board members, paraprofessionals

and other persons providing educational services in the school system on a full-time basis regardless of whether they are employees of the school system.

(b) Five persons shall constitute a team except that a six-member team may be permitted if one of the persons is a school board member.

(c) Each team shall include at least one administrator, one teacher, and one counselor or school psychologist. Team members may represent various schools within the educational agency.

(d) If a person selected as a team member is unable to undergo training, his or her place shall be taken by an alternate with similar attributes and experiences.

(21 U.S.C. 1002)

§ 128a.16 Team activities.

After training, teams shall develop and carry out alcohol and drug abuse prevention programs to meet local needs in their school districts. Programs developed by the teams could include activities such as: Peer counseling, individual counseling, inservice training for teachers, workshops for parents, alternatives to alcohol and drug abuse, community education workshops, alternative education activities, curriculum development, communications skills and problems-solving workshops, referral services, drop-in centers, fund raising and resource mobilization.

(21 U.S.C. 1002)

§ 182a.17 Coordinator.

One team member, who is a full-time employee of the grantee, shall be designated as the program coordinator. He or she shall:

(a) Coordinate the planning and implementation of alcohol and drug abuse and early intervention education programs in the school or schools of the grantee agency;

(b) Serve as liaison on matters relating to the implementation of the program between the regional training center and the grantee; and

(c) Submit to the training center quarterly progress and final technical reports so that the center may provide appropriate technical assistance.

(21 U.S.C. 1002)

§ 182a.18 Allowable costs.

(a) A local educational agency may use funds received under this subpart to pay:

(1) The cost of travel of team members to and from the U.S. Office of Education supported regional training centers;

(2) The cost of providing substitute teachers, thereby permitting the teacher members of the team to be trained;

(3) An amount to be determined annually by the Commissioner not exceeding $6,000 to permit the grantee to pay for part of the salary of the coordinator and/or team members to implement the program in the grantee agency for twelve months following training; and

(4) Hardship expenses for individual team members deemed to be reasonable by the Commissioner; i.e., expenses which, if not reimbursed, would prevent a team member from participating, such as baby sitting expenses.

(b) A private educational agency may use funds received under this subpart to pay:

(1) The cost of travel of team members to and from the U.S. Office of Education supported regional training centers; and

(2) Hardship expenses for individual team members deemed to be reasonable by the Commissioner; i.e., expenses which, if not reimbursed, would prevent a team member from participating, such as baby sitting expenses.

(21 U.S.C. 1002)

SUBPART C—HELP COMMUNITIES HELP THEMSELVES PROGRAM

§ 182a.21 Purpose.

The purpose of this subpart is to provide leadership training and technical assistance to teams from local communities in order that they may develop and implement alcohol and drug abuse prevention programs to deal effectively with alcohol and drug abuse problems in their communities. The training will be without cost to the participating teams. The training that these team members receive will emphasize leadership, communication, and planning skills needed to:

(a) Assess alcohol and drug abuse problems in their communities;

(b) Mobilize community resources; and
(c) Develop and administer coordinated community programs.

(21 U.S.C. 1002)

§ 182a.22 Eligible applicants.

Community-based public and private nonprofit agencies, institutions, and organizations are eligible to receive funds under this subpart.

(21 U.S.C. 1002)

§ 182a.23 Selection of applications.

(a) Eligible applicants shall submit applications for assistance to the regional training centers supported by the U.S. Office of Education before the closing date for these applications established annually by the Commissioner. The regional training center will evaluate the applications on the basis of the criteria set forth in § 182a.25 and will make recommendations to the Commissioner as to which applicants should be selected to receive training.

(b) In the selection of applicants under this subpart, the Commissioner will take into consideration the recommendations of the training centers and the extent to which the applicants selected reflect a distribution throughout the Nation among communities of varying characteristics such as geographic size, ethnic composition, concentration of persons with limited English-speaking ability, and socio-economic levels in urban, suburban, and rural areas.

(21 U.S.C. 1002)

§ 182a.24 Application requirements.

(a) Eligible applicants shall submit applications for assistance which contain the following information and such other information as the Commissioner may from time to time prescribe:

(1) A description of the applicant agency in terms of its organization, size, and capability to administer an alcohol and drug abuse prevention program;

(2) A description of the community in which the applicant agency is located in terms of:

(i) Geographic size;
(ii) Whether it is urban, suburban, or rural;
(iii) Number and types of ethnic groups residing in the area;
(iv) The number of persons with limited English-speaking ability residing in the area; and
(v) Community socioeconomic profile;

(3) A description of the alcohol and drug abuse problem in the community and a description of the activities of the organizations, agencies, or institutions which are dealing with the present alcohol and drug abuse problems;

(4) A list of the groups or organizations which will participate in the implementation of the program, following the training of team members;

(5) A list of the population groups within the community which would be affected by the implementation of alcohol and drug abuse prevention programs by the team;

(6) A description of the team members including their current positions and their experience and leadership capabilities which will enable them to carry out an alcohol and drug abuse prevention program effectively;

(7) A description of how team members will be utilized after training to develop a new or modify an existing alcohol and drug abuse prevention program; and

(8) A description of the support, both administrative and financial, which the applicant will make available to the team to facilitate its alcohol and drug abuse prevention activities after training.

(b) Applicants shall assure that:

(1) Reports will be submitted containing information the Commissioner may reasonably require; and

(2) Records will be maintained and made accessible to the Commissioner to assure the correctness and verification of the reports.

(21 U.S.C. 1002)

§ 182a.25 Funding criteria.

In addition to the criteria set forth in 45 CFR 100a.26(b), the following additional criteria will be utilized in evaluating applications for selection under this subpart:

(1) The extent of the alcohol and drug abuse problem in the local community to be served;

(2) The extent to which team membership includes persons who have demonstrated leadership capabilities;

(3) The extent to which the proposed program activities address unmet alcohol and drug abuse prevention needs in the local community to be served.

(4) The extent to which alcohol and drug abuse prevention efforts by the applicant will be coordinated with related efforts in the schools and communities served by the applicant;

(5) The degree of the applicant's commitment to support and facilitate the alcohol and drug abuse education activities of the team after training is completed as demonstrated by the applicant's stated intent to support these activities administratively and financially; and

(6) The extent and manner in which the team will be utilized after training in the development and administration of drug abuse prevention programs in the community.

(21 U.S.C. 1002)

§ 182a.26 Composition of teams.

(a) Teams to receive training at regional training centers supported by the U.S. Office of Education shall be composed of five to seven members representing a variety of professions and experience, who are representatives of the community and are capable of functioning together as a team within the community.

(b) In the selection of team members, priority should be given to persons who have demonstrated leadership within their community prior to selection and who, in the past, have demonstrated concern for or interest in alcohol and drug abuse problems.

(c) Each team selected shall have:

(1) One member who is directly involved with elementary and secondary education, preferably in a decision-making capacity; and

(2) At least one but no more than two youth representatives, who are not less than 18 years of age.

(d) The applicant organization is responsible for the selection of team members and alternate team members. If a person selected as a team member is unable to undergo training, his or her place shall be taken by an alternate with similar attributes and experiences.

(e) Each person selected by the applicant organization shall be available to work with the leadership team in the development and administration of an alcohol and drug abuse education program upon returning from the training sessions.

(f) The applicant organization shall designate one member of the team as liaison between the applicant organization and the regional training developmental resource center, and between the applicant organization and the Office of Education.

(21 U.S.C. 1002)

§ 182a.27 Team activities.

After training, teams shall develop and carry out alcohol and drug abuse prevention programs to meet local needs in their communities. The following types of activities may be carried out: Community education workshops, drop-in centers, group and individual counseling, parent workshops, alternatives to alcohol and drug abuse, communication skills and problem-solving workshops, court diversion, teacher training, interagency coordination, student training, referral services, fund raising and resource mobilization.

(21 U.S.C. 1002)

§ 182a.28 Allowable costs.

The Commissioner will pay the following costs through the regional training centers:

(a) Travel of team members to and from the regional training centers: and

(b) Hardship expenses for individual team members deemed to be reasonable by the Commissioner; i.e., expenses which, if not reimbursed, would prevent a team member from participating, such as baby sitting expenses.

(21 U.S.C. 1002)

[FR Doc. 76-31417 Filed 10-26-76; 8:45 am]

Mr. BRADEMAS. Young people today are frequently caught in the maelstrom of rapid social change. Global interdependence links their fate to events thousands of miles away. Economic change frequently dislocates them and upsets their career plans. There are new attitudes toward the family, sex roles, education, religion, and government, to mention only a few.

The young person living in this last quarter of the 20th century is faced with both extraordinary challenges and demands. This young person often must cope with these challenges and demands without the security and support of the social institutions that gave individuals a clearer sense of direction in earlier times.

In sum, young people are buffeted by change and often lack the beacons that will enable them to navigate the always difficult years of adolescence.

One symptom of this situation is young people often seek an escape through the abuse of alcohol and drugs.

The abuse of alcohol and drugs by young people exacts a terrible toll in young lives stunted or even ended.

The Alcohol and Drug Abuse Education Act is obviously not a comprehensive solution to this problem. The problem in its broadest sense requires making our society more humane. To deal more specifically with alcohol and drug abuse demands the effective contributions of health care institutions, law enforcement agencies, and many other institutions in this society.

However, the Alcohol and Drug Abuse Education Act does make important and, in my view, unique contributions to this effort.

First, this program emphasizes prevention, deterring our youth from socially and personally destructive behavior rather than mopping up the casualties when it is often too late.

Second, this is an educational program, and it is administered by the U.S. Office of Education. This program has credibility with educators and ties to the schools. This linkage of alcohol and drug abuse prevention with the schools where our young people spend much of their time is vital in an effective overall strategy to deal with this problem.

The Alcohol and Drug Abuse Education Act authorizes the U.S. Office of Education to award grants and contracts for developing teaching materials, training teachers, and offering courses in elementary and secondary schools on alcohol and drug abuse prevention. The act also authorizes community education programs. The act was originally passed in 1970 and was reauthorized in 1974.

We look forward this morning to hearing from witnesses who can inform us concerning what this program has been doing, what it has accomplished in recent years and what it has not done, and what improvements should be made in the legislation.

We are very pleased to have as our first witness Thomas K. Minter, Deputy Commissioner for School Systems, the U.S. Office of Education, and Dr. Helen Nowlis, Director of the Alcohol and Drug Abuse Education Programs of the U.S. Office of Education.

I would also like to welcome Mr. William Blakey, Deputy Assistant Secretary for Legislation, and Dr. Albert L. Alford, Assistant Commissioner for Legislation, U.S. Office of Education.

Mr. Minter?

STATEMENT OF THOMAS K. MINTER, DEPUTY COMMISSIONER FOR SCHOOL SYSTEMS, ACCOMPANIED BY HELEN NOWLIS, DIRECTOR, ALCOHOL AND DRUG ABUSE EDUCATION PROGRAM, U.S. OFFICE OF EDUCATION, WASHINGTON, D.C.; WILLIAM A. BLAKEY, DEPUTY ASSISTANT SECRETARY FOR LEGISLATION (EDUCATION); AND ALBERT L. ALFORD, ASSISTANT COMMISSIONER FOR LEGISLATION, U.S. OFFICE OF EDUCATION, DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE, WASHINGTON, D.C.

Mr. MINTER. It is a pleasure to appear before your subcommittee this morning to discuss our activities under the Alcohol and Drug Abuse Education Act and the administration's recommendations for renewal.

When the Office of Education entered the drug abuse area in 1970, concern about young people's use of drugs was at a high, if not panic, level. Requests for help in responding came from every corner of the Nation. Although the drug problem is no longer considered the Nation's No. 1 problem, and most current studies indicate that the abuse of most drugs, with the exception of alcohol and marihuana, is no longer increasing, those most directly involved, students and their parents, still consider it a major problem.

In a 1977 Gallup poll of teenagers across the Nation, when asked what they considered the biggest problem facing their generation, 27 percent named drug use and abuse No. 1, 20 percent named getting along with parents, and 7 percent named alcohol use and abuse. No other problem was listed by more than 6 percent.

Another 1977 Gallup poll of public attitudes toward the public schools concluded that the next great advance in education will come when parents and teachers work as a team. Parents of children in the public schools approved 4 to 1 the idea of offering courses to parents as a regular part of the public school system. When asked which of 16 possible offerings they rated highest, "what to do about drugs, smoking, and alcohol" was mentioned more often than any other both by parents whose eldest child was 12 and those whose eldest child was 13 to 20. It is interesting to note that improving parent-child relations was listed as No. 9 by parents but No. 2 by teenagers.

In 1970, we already knew that the traditional scare techniques did not work, and there was increasing evidence that even objective information about drugs and the effect of drugs was not sufficient to deter drug use and abuse in many young people. There was even beginning to be some evidence that increased knowledge may lead to increased curiosity and experimentation, often in those most susceptible to the risk and danger of drug abuse.

Faced with the ineffectiveness of most widely used "education programs" that put major emphasis on substances and their effects, and sought simple, universally applicable approaches, the Office of Education program made the decision to shift the emphasis from substances to people, people who decide to use drugs and alcohol as well as people who decide not to use them, and to the many psychological and social factors that influence these decisions.

We defined use and abuse as human behavior that serves some function or would not persist. We turned to the social and behavioral sciences as a basis for designing programs. We sought guidance from research in learning, in motivation, in growth and development, in communication, in education, in organizational development, and in the nature of deviant and destructive behaviors of all kinds.

We designed a program based on this information and on the assumption that the most effective way to discourage destructive behavior is to engage the major institutions that influence the development of young people in promoting maximum positive growth and development. We then set up a self-corrective system that provided continual feedback as a basis for correcting or improving the program, its assumptions and its strategies.

The program has made some further somewhat unusual assumptions:

Each community's problem is different, and each must assess its own problem and enlist its own human, cultural, and financial resources in prevention efforts;

People can be given the skills to solve their own alcohol and drug problems;

Local programs usually involve doing differently things that are already being done and need not represent an add-on to an already burdened system;

Effective programs require change. Lasting change can come only from within, and all segments of the institution—administrators, teachers, professionals, students, and parents—must be involved.

Based on these assumptions, the program involves six elements:

One, five regional resource centers which between them serve the entire United States, each covering an average of 10 States;

Two, project teams, trained and supported with technical assistance by the centers, in over 3,000 school districts and communities;

Three, a central data base in Chicago to compile and distribute information on the entire system;

Four, a National Action Committee, a nationwide network of top consultants on alcohol and drug problems and on education, who can be deployed as needed;

Five, demonstration programs to train teachers-to-be in colleges of education. Funding for these projects ended September 1977; however, all are continuing with support from their own institutions.

Six, a small central staff in the District of Columbia to provide overall leadership in planning and maintenance of the entire system.

Working together, the parts of this national system provide training and followup technical support to local schools and communities, to colleges of education preparing future teachers, and to State departments of education and other agencies.

Since, at the current funding level, the training of school teams and followup onsite technical assistance through the five training centers represent the major program activity, the remainder of my remarks will be confined to the training centers and the teams they have trained.

The five centers represent an interdependent network, sharing experiences, supplementing each other with unique skills, learning from each other's mistakes. Each center serves approximately 10 States.

The Centers enter into a yearlong contract with a school, ideally 2 years when resources are available. This begins with an onsite visit by center staff to initiate a needs assessment and to gather information about the school and the team members that will be used in training that team. Training itself takes 10 days to 2 weeks, and is tailored to meet the distinctive needs of each team.

Teams learn: To assess the needs and expectations of the youth population to be served; to formulate realistic objectives for meeting those needs; to identify human and financial resources in their school and community for supporting a prevention program; to design an action program addressed to their carefully defined problem, specific projects to which the team is committed; to evaluate the range of prevention materials and methods available and to adapt those that are appropriate tools for its particular school district or community; and to build in feedback and evaluation so they will know what parts of their strategy are working, and why, and how.

Training is followed by onsite technical assistance or post graduate training designed to facilitate the implementation of the action plan and teach the team to solve problems unique to that team.

Through this system, teams have been trained and supported with technical assistance in every State and territory, the number varying from 164 in California, 157 in New York, and 125 in Texas, to 15 to 25 in small States. This works out to some 3,000 schools and school-communities, and involves approximately 16,000 educational personnel, students, and out-of-school youth and personnel from law enforcement, health, and social service agencies, civic and church leaders, parents and State and Federal personnel. Programs set up by these teams reach approximately 1 million individuals annually.

These teams have formed networks, many times under the leadership of the State education department or other State agencies for drug/alcohol abuse and mental health. They share expenses and expertise. In addition, teams have raised local and State funds to support their own programs. In the last year alone, teams raised over $3,670,000.

Teams do function once they get back into their communities. They set up programs that win the support of schools and communities. These programs do change institutions, particularly schools, and thereby make a significant difference in the lives of young people.

Mr. Chairman, I am now going to give several examples of the ways in which the teams work.

With the enthusiastic support of the local school board, the Aberdeen, S. Dak., team has developed a comprehensive program which involves a "new model me" program in the high school, a "families are responsible" program for parents and youth, and a series of workshops on "humanizing the classroom."

Reports from the school and community personnel who participated in the workshops indicate learning in a number of areas: Their own skill development; student behavior; self-behavior; and future needs for skill development. Teachers report that they are "tuning in" more to their students as persons and not objects; they are getting to know their students better and are more aware of students' feelings. The students themselves feel much more comfortable in the classroom and are more considerate of each other. Discipline has greatly improved as have student listening skills.

A school team from a predominantly black midwestern high school in Willow Run, Mich., set up a student services center with a vigorous outreach program that identified the need for further programs addressed to drug problems. A second team was trained to address this need. The second team expanded the original team's peer listening program into all junior and senior high schools and, with the combined skills and resources of team members, students, parents, and district personnel, developed a K through 6 curriculum which is being adapted by three other school districts and is used by a nearby university in the training of student teachers.

Although all of us know subjectively that we have seen changes in the students, those changes are now being measured.

What starts as a school district program may spread out to parts of the community, resulting in communitywide impact. For example, a team from a high school in industrial Gary, Ind., population 175,000, developed a counseling and training program for its own students and those from its feeder junior high school designed to help both students and faculty develop and utilize effective life-coping skills to make drug use less likely. Twenty-five of 750 students and 12 teachers trained in communication skills, positive self-concept development, and alternatives to destructive behavior were employed by the city manpower administration to work with 1,400 youngsters in the 1976 summer youth program.

The total trained group set up a peer counseling program for 1,600 youths enrolled in school or in the city's manpower program in the summer of 1977.

Three teams of school personnel from the archdiocese of a large midwestern metropolitan area not only developed a 4-year substance abuse curriculum for the high school, conducted workshops for students, staff, and parents, set up a peer counseling program, and identified available alternatives to drug/alcohol abuse, but also developed an interface with similar programs in their feeder schools.

The three teams have become the moving force in a diocesanwide umbrella organization that provides sources of information, education/training, counseling, referral, and coordination with other agencies for the prevention, early intervention, treatment, and aftercare of clinically dependent persons.

Their target population includes 5,000 families and 8,700 students. Over the past 4 years, the group has raised $145,396 from Hennipen and Ramsey Counties, the Minnesota Single State Agency, and the archdiocese. The original OE investment was $5,187 plus technical assistance.

A school community team often combines with a school team to develop programs that have a major impact on a whole community. It would seem that once skills have been developed, and they have been used successfully in one venture, there may be no limit to the ability and willingness, if not appetite, to attack other problems.

Beginning in 1972, in Bergenfield, N.J., a lower and middle income city of 33,000, a community team, followed by a school team and a police team trained at police department expense, have combined forces and expanded their membership to include 300 people.

Together, they have developed a drug prevention curriculum and accompanying programs for all schools, grades K through 12. They have hired a full-time social worker, with CETA funds, to

set up a crisis home system for court-bound youth. Twenty-eight of 30 youths were successfully diverted. They have received a grant from the State LEAA to train 13 other communities in setting up crisis home systems. They have conducted an annual outdoors activity program for youth in difficulty with school or police. They have conducted workshops for teachers, counselors, administrators, and school board members to define problems in the school system and work jointly to solve them. They have established a crisis intervention team to handle serious adolescent suicide attempts. They have trained senior citizens to work with students in elementary, middle, and high school classes. They have served as consultants to innumerable other communities and police departments.

Police report an 80 percent reduction in vandalism. Merchants report a dramatic reduction in loitering. There have been fewer criminal arrests among young people, fewer disruptions in schools, greatly improved relationships among schools, police, community members, youth, and parents. Alcohol and drug abuse have been decreased.

In the 4 years from 1972 to 1976, the program trained 3,000 teams from a variety of settings, most of them, however, from rural, suburban, and small and medium size city school districts. In fiscal year 1977, as resources available to the program decreased, the decision was made to concentrate on the challenging problem of alcohol and drug abuse in large urban school districts. Prior experience with large urban school districts indicated that a critical mass of trained teams and concentrated technical assistance not possible under the generally focused program are necessary.

Accordingly, in fiscal year 1977, the program experimented with clusters of four school teams from definable segments of large urban school districts such as a high school with its feeder junior high schools or four schools from a regional division of a larger system. Forty clusters of four schools each in large urban areas were supported for training and followup onsite assistance.

In fiscal year 1978, emphasis will be on using the existing trained urban clusters to develop a local training capability so that potential ongoing districtwide prevention/education networks can be established.

On the basis of repeated reports that successful alcohol and drug abuse prevention programs often reduce vandalism, dropouts, truancy, racial conflict, disciplinary problems and other destructive behavior, the Office of Juvenile Justice and Delinquency Prevention of the Law Enforcement Assistance Administration suggested a cooperative effort with the alcohol and drug abuse education program utilizing its system and strategies on the problem of prevention of school crime and violence.

The Office of Juvenile Justice provided $1.2 million in fiscal year 1976 and $2.8 million for fiscal year 1977–78 for this effort. Training and technical assistance were provided to seven-member teams from 81 schools in January and February of 1977 under an interagency agreement. In November 1977, this was extended to support the training of 35 clusters of four school teams—130 teams—from major urban school districts in the 1977–78 school year and an additional 20 clusters consisting of 80 teams in the 1978–79 school year.

An additional challenge involves a current prevention, not remediation effort as part of the Commissioner's reform of the urban high

school initiative. Already trained urban school district clusters will be specially trained to develop basic prevention programs in their feeder elementary schools. The goal of these programs will be to facilitate the development of positive self-concept and to foster the development of personal and social skills in young people essential to effective cognitive, emotional, and social growth.

Mr. Chairman, I hope you will conclude from the above testimony that we are pleased with the results we have obtained from our programs in alcohol and drug abuse to date. We believe that the approach we are taking is paying very handsome dividends, and we have been able to do this at appropriation levels substantially below the authorizations in the existing legislation.

As a consequence, we plan to continue our activities along the lines indicated in this testimony. We are inclined to think that we could carry out our activities under a somewhat simplified authority over what exists. However, we can operate under the existing Alcohol and Drug Abuse Education Act language and would like to see a 1-year extension of that authority to avoid difficulties in the 1979 appropriations process, and allow an opportunity for further review of this program in relation to other administrative initiatives.

We thank you, Mr. Chairman, for the opportunity to present the administration's views. Dr. Nowlis and I will be happy to try to answer any questions you may have at this time.

Mr. BRADEMAS. Thank you very much, Dr. Minter. Dr. Nowlis, have you any comments you would like to add?

Ms. NOWLIS. No.

Mr. BRADEMAS. I am grateful for your testimony, Dr. Minter. This is your first appearance before our subcommittee, and we welcome you warmly to it.

Mr. MINTER. Thank you.

Mr. BRADEMAS. I have a number of questions about your testimony. I am a little puzzled by your recommendation of just a 1-year extension. I do not see that we are going to have any difficulty with the 1979 appropriation process, because it is certainly my own intention, if there is support in the subcommittee, to report legislation reauthorizing the act before May 15.

Now, I do not know how long you all are taking to get yourselves together down there, but we have a lot of work to do in this subcommittee, and my own attitude is, we are not about to sit around and wait for you to decide what your views are before we move, and your suggestion of a 1-year extension, in your words, "to allow an opportunity for further review of this program in relation to other administration initiatives," implies you will not have your recommendations ready in time for us to act before May 15, without the benefit of your views.

Do I misrepresent what you have said?

Mr. MINTER. No. There is discussion going on now between the White House and the Secretary, and it may be that our recommendation would be that this program be a part of the Education Quality Act, but that is the extent of the discussion, and the reason for the recommendation.

Mr. BRADEMAS. I am puzzled by that also, because you say in your statement, and again I am just quoting, you say the approach in this program is "paying handsome dividends."

Mr. MINTER. Yes; it is.

Mr. BRADEMAS. In plain English, that sounds to me as though you think there is something to be said for it, and you go on to say that it is paying handsome dividends with appropriation levels substantially below the authorization in the existing legislation. Well, that is what you say. I take it that is what you mean. If that is the case, why did you recommend for fiscal 1979 only $2 million, which is a real reduction, given inflation, from the amount appropriated for the current fiscal year?

Mr. MINTER. I am going to refer that to Dr. Nowlis.

Ms. NOWLIS. The amount appropriated for the current fiscal year is $2 million.

Mr. BRADEMAS. Yes?

Ms. NOWLIS. And in 1977 it was $2 million.

Mr. BRADEMAS. Yes; you are recommending for fiscal 1979?

Ms. NOWLIS. $2 million.

Mr. BRADEMAS. Given inflation, I just said that is a real reduction in funds for the program, and if this is a program that is paying handsome dividends, why are you asking for in real terms less money for it?

Mr. BLAKEY. I will try to help with that. I will not try to justify it Mr. Chairman. I will say this, though. In connection with the discussions going on within the Department about reauthorization of this and other programs as well as a number of other programs under what is now known as the Special Projects Act, a somewhat more flexible authority is being considered for proposals which would allow the Commissioner, with this program as well as others, to add additional moneys so that although there would be the $2 million as is recommended in the administration's fiscal year 1979 budget, there would still remain the possibility that additional sums under a flexible authority granted the Commission in proposed legislation, that additional money could be added to it.

So, although you are correct in terms of a real reduction, there would still be the outstanding possibility that additional money could be spent in this program.

Mr. BRADEMAS. Mr. Blakey, I do not want to cause you distress, but that sounds like the rhetoric we have heard in this subcommittee for 8 years under Richard Nixon and Gerald Ford, which was a smokescreen behind which they hid, in order to oppose this kind of legislation. I must say I do not understand how you can on the one hand tell the subcommittee this is a program that deals with an admittedly very grave social problem in our country, describe it as "paying handsome dividends," and come in with an appropriations recommendation that is, to repeat, in real terms less for the next fiscal year than Congress has appropriated for this year, and then tell me that you want more flexibility with the illusory hope, if I understand you, of getting still more money.

It would have been more straightforward, it seems to me, for you to have come in and said, this is a program that is paying handsome dividends; therefore, we want to have more money for it. That is logic I can understand. I really do not understand your logic at all from what you have just said. Do you follow my question?

Mr. BLAKEY. I follow your question.

Mr. BRADEMAS. If it is so good, why do you not want to continue it and expand it? Why do you want just a 1-year extension? Why do you want less money?

Mr. BLAKEY. The reason for the 1-year extension is simple, as Dr. Minter indicated. There are discussions still going on with respect to this problem as well as others within the Department, and that is the reason why the administration has suggested only a 1-year extension at this time.

On the budgetary question, it is my understanding, and I was not here during the Nixon-Ford years, that they have never made allowances, the Office of Management and Budget has never made allowances for inflation in terms of making decisions with respect to recommendations.

Mr. BRADEMAS. Dr. Nowlis, could this program effectively use additional funds?

Ms. NOWLIS. The problem is great. The need is great. I think we have arrived at a point that has taken a long time, where we do have an effective approach, and we can respond in terms of what is available. In 1972 and 1973, we were training 800 and 900 teams. This year we are training 140 teams.

Mr. BRADEMAS. The Census Bureau tells us there are 215 million people in this country. This is really a drop in the bucket. What is the incidence of the use of drugs and alcohol in elementary and secondary public schools in this country?

Ms. NOWLIS. There are a number of national samples which do not all agree. What they do agree on is that the use of alcohol and the use of marihuana are definitely increasing at the upper levels of the elementary schools. However, it is not the majority of young people. About 20 percent are using. The majority are not deeply involved in drug use. In other words, it is not too late to intervene fairly simply.

Mr. BRADEMAS. How many children would that be? How many young people would that be in real terms as distinguished from percentages?

Ms. NOWLIS. All of our data are based on national samples and surveys.

Mr. BRADEMAS. Well, extrapolate.

Ms. NOWLIS. I would need some help.

Mr. BRADEMAS. I would think you could give us that rather quickly. This is your universe of responsibility. You ought to be able to tell us not only in percentage terms, but certainly you ought to be able to answer the question, how many young people are using drugs and alcohol, extrapolating from the samples to which you have referred in public elementary and public secondary educational institutions in this country, and also give us some indication from those samples, which I take it from your answer you would be able to do, whether they are seriously involved or not so seriously involved, or whatever categories are regarded by you as appropriate.

Ms. NOWLIS. I would like to supply that for the record, if I may, and check with the latest surveys from the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism.

Mr. BRADEMAS. I would like you to tell us also once you have given us that extrapolation, and I want you to be as scientific and objective about it as possible—I do not want any political answers. I do not

want any smokescreens. I want the facts, as they say. I want you to tell us what total appropriation would be required fully to implement the present programs that you are undertaking, that is, the kinds of programs you are presently undertaking, and then what appropriations would you require fully to implement the programs that are authorized by the legislation, which is, of course, a different question. You see, I am quite shocked that you come in here and tell us this is an effective program, paying handsome dividends, and please give us less money, and don't extend the program except for 1 more year. That is just not the rational response, and then to say, well, they are talking it over downtown, that is the kind of stuff we have heard in this committee for the last decade.

Ms. NOWLIS. Senator Brademas——

Mr. BRADEMAS. Congressman.

Ms. NOWLIS. I am sorry. Congressman Brademas, the legislation as it currently exists authorizes a number of things which no longer seem to be as effective as some of the things we are doing. So, to implement everything in there would be a massive problem, and in some areas not as effective as some of the programs we have developed.

I think we have learned a great deal in the last 7 years.

Mr. BRADEMAS. I do not want to be gratuitously combative, but for you to tell me that some things don't work as well as other things is a statement with which no one can quarrel. You are the people testifying that the program you are operating is paying handsome dividends. It is your rhetoric, not mine. If it is so good, why can you not continue it and expand those programs? This is a big country. Do you understand what I mean?

Five years ago, Dr. Nowlis, 6 years ago, I put these same kinds of questions to you in oversight hearings on this legislation in 1972, and we seem to be having a very hard time getting any sort of hard data. I really have to tell you I think you should be prepared to come in and answer questions like these before a subcommittee. They are not unfair questions. I simply ask you, how many young people in our schools are involved in using drugs and alcohol. Is that not a reasonable question?

Ms. NOWLIS. Yes; but the answer is not always as clear as we would like it.

Mr. BRADEMAS. I understand that, but at least you ought to be able to give us some rational ballpark response to a question like that, if you take surveys, which you have indicated you do, and samplings. I mean, we have to know with what we are dealing if we are going to make intelligent legislative judgments. You are the experts in this. We are not.

You see, I am very distressed, because it is my impression you are telling us the same thing the last two administrations did, namely, that you do not want to invest serious money in coping with a grave, almost scandalous problem, from everything we can read and understand in the popular press.

So, I must tell you, I am disappointed with your response. I must say, I am struck by the fact that the Law Enforcement Assistance Administration seems to have the judgment that what you are doing makes some sense, because I note on page 10, Dr. Minter, of your statement, the Office of Juvenile Justice provided $1.2 million in fiscal 1976, and nearly $3 million for fiscal years 1977 and 1978, for the effort in which you have been engaged.

Now, there is another agency of the Government with serious responsibilities in the law enforcement field that seems to have some confidence in what you are about. I assume that they think what you are doing is effective also.

Let me ask you one other question before yielding to Mr. Jeffords. We amended the act in 1974, as you know, to include alcohol abuse as well as drug abuse in your mandate. With your experience since 1974, do you think that this was a wise step, or are the problems of alcohol abuse and drug abuse, at least so far as they relate to education, sufficiently different to require significantly different programs and approaches?

Ms. NOWLIS. We feel very strongly that the same approach works for both, and in some communities the major problem is alcohol abuse. In some, it is drug abuse, and in some it is a combination of both, which can be even more dangerous. We have always defined alcohol as a drug, and have always involved both, and would like to continue to do so.

Mr. BRADEMAS. Just one other area, if Mr. Jeffords doesn't mind. If there have been evaluations of the alcohol and drug abuse program, can you tell us what those evaluations have shown, and do you think those evaluations have been fairly accurate representations of the effectiveness of the programs or lack thereof?

Ms. NOWLIS. The evaluations of the program have been far less than we, A, had planned, and B, had desired. At the time we initiated the school team program, we initiated an evaluation, because we feel very strongly that you evaluate as you go along. You do not just wait until the end of something and then impose on it as a collage an evaluation. We did the same thing when we initiated our preservice education, teacher-training program.

In 1974, the legislation included for the first time a subsection which said that not more than 1 percent of the appropriation might be used for evaluation. Now, if it were 1 percent of the authorization, it would be far more than enough, but 1 percent of $2 million is $20,000, and you cannot evaluate in any scientific sense a nationwide program for $20,000.

Mr. BRADEMAS. Do you work with the NIE at all?

Ms. NOWLIS. We work closely with the NIE. They have not seen fit up to this time to evaluate our programs.

Mr. BRADEMAS. What do you do, then, when you work closely with them?

Ms. NOWLIS. Help them identify demonstration programs that they will fund and evaluate, keep in very close touch with them in terms of the research results that they produce, particularly this new Safe Schools Study Act, which, interestingly enough, comes out with recommendations which are very similar to what we have been doing in terms of the need for changing the climate in schools, training teachers, improving relationships among teachers, between teachers and administrators, teachers and students, and teachers and parents.

Many of the recommendations are very congruent with our experience.

Mr. BRADEMAS. Thank you, Mr. Jeffords?

Mr. JEFFORDS. It is difficult to follow your questioning, because you have asked the questions I would like to ask, being a part of the minority, Mr. Chairman, but you did it very effectively, and I appreciate it.

I would like to say that I am also deeply concerned about the testimony today. I do not think there is any question, at least from the figures I have seen, that we are dealing with a most serious health and social problem. I know Bill Butynski will be testifying later. He and I worked in these areas when I was attorney general of Vermont. At that time, about the time that this legislation was passed, it seemed that the best hope of being able to stem the tide and reverse things was through educational programs. We tried to get the students and children at a time when perhaps we could influence them, not only because of the temptations to themselves, but also to assist in reconciling the family problems and the alcoholism in families.

I look at the history and see the diminishing appropriations in this area, so I share the chairman's concern. I know how much funding OMB gave you. What I would like to know is, how much did you request?

Ms. NOWLIS. As you know, we were in a zero-based budgeting phase, and came in with a minimum and a second level and an optimum, and my memory is that the minimum was $1.8 million. The current was $2 million, and the optimum was about $6 million.

Mr. JEFFORDS. So you felt that if you had $6 million, you could do the job as you saw it ought to be done?

Ms. NOWLIS. We could certainly do a much better job than we are doing, both in terms of our responsiveness to need and in terms of developing some other areas which we think are rather important. Our demonstration projects are really a sort of first step, from which we learned a great deal, and there is a lot more followup we would like to do in the preservice area, and we would like to be able to respond to other than just the large urban school districts.

Mr. BLAKEY. Mr. Jeffords?

Mr. JEFFORDS. Coming from a rural area, I cannot agree with that.

Mr. BLAKEY. If I could just add this, I am not an expert on how ZBB works, but that $6 million figure would have assumed a Federal education budget in the $14 billion range as the figures escalate, the way the system works. Everything would have gone up, because that would have been very high in what is referred to as the "band."

Mr. JEFFORDS. I would presume that somewhere someone would be assessing priorities, and my question is, if this is as serious a health and social problem as I believe, it seems to me it might rank higher than other jumps in other educational programs.

Are you telling me that that would have required the same triple jump and 300 percent increase in all educational programs in order for you to get your $6 million?

Mr. BLAKEY. The way this system would have worked would have meant funding under P.L. 94–142 might have been at the full 20 percent. The title I would have been funded at a much higher level than the administration's budget reflects.

Mr. JEFFORDS. I am not sure I understand it, but I will accept it anyway. Also, I am concerned as to where we should be going with this legislation. If this testimony had been given to me a year ago, a few days after the new administration had come in, I might have understood it, but to be told 1 year later that we are still talking about it and thinking and rethinking it, and want a 1-year extension, concerns me as it does the chairman.

I do not know just what you had in mind. You seem to suggest that you have some amendments you would add like to the present act, or you would like to sort of mold it into the Education Quality Act, whatever it is. When do you expect you will have firm recommendations for us on that? At least as to amendments to the present act, it doesn't seem that that should be a very difficult process. Of course, I can understand more difficulty in making decisions on switching to a different act, but I do not uuderstand why you could not have decided what amendments you want in the present act.

Mr. BLAKEY. One of the several options being reviewed—the answer to your question is, 2 to 4 weeks, probably shorter rather than the the longer. When the request came from the chairman to testify, obviously, we had to appear today, and those decisions just have not been made at this juncture. Two to four weeks.

One of the options would be, obviously, to extend the act, with some minor revisions, in its present form. Another of the options would be that it be considered as part of the proposed educational quality.

Mr. JEFFORDS. I think that is all I have, Mr. Chairman.

Mr. BRADEMAS. Just two other questions. What advantages would there be in including it in what I take is some overall kind of grab-bag bill, this quality education bill, as distinguished from the present program which has been paying such handsome dividends?

Mr. BLAKEY. OK. I believe that the advantages are these. First, an ability on the part of the Commissioner or whomever is administering the program to institute or initiate programs. For example, if all the programs were combined under the proposed Educational Quality Act, and for the next year or two there were priority needs, for example, in local schools in the area of drug abuse or in the area of metric education, the additional amounts of money could be spent in those areas during those periods of time of high priority. That flexibility, the flexibility which the Commission would have to add additional money to those programs, either from newly appropriated funds or funds from other programs, would permit the Federal Government during certain periods of time to take a greater role in a particular area because the need was there.

That is one reason behind the proposal. The other is to simplify the administration of a number of relatively small programs dollarwise within the Office of Education.

Mr. BRADEMAS. I do not understand that answer, Mr. Blakey, at all.

Mr. BLAKEY. OK.

Mr. BRADEMAS. I do not mean to be unseemly in my response, but if you admit there is a grave social problem with the abuse of drugs and alcohol in the schools of this country, and I guess you have said that, have you not?

Mr. BLAKEY. Yes.

Mr. BRADEMAS. That there is a very serious problem?

Mr. BLAKEY. Yes.

Mr. BRADEMAS. Then why do you not ask for more money to carry out what you have already testified is a program paying handsome dividends, a successful program? For you to say that you want to fold this into some grab-bag approach under which you know very well, as well as I do, there is just no serious prospect of reaching out and taking money away from metric education, for heaven's sake, and

putting that into substantially increasing the funds available for this program. That is not a real-world alternative in Washington, D.C., in 1978.

Mr. BLAKEY. Mr. Chairman, I do not think that was the thrust of what I said. What I said was, additional money would be available to the Commission at a time when there was a greater need in the program. For example, when we go to metric conversion, there would be a greater need to spend additional money in that program.

Mr. BRADEMAS. Let's forget metric education. There is a great need in respect to drug and alcohol abuse education, is there not, right now?

Mr. BLAKEY. Yes.

Mr. BRADEMAS. Why are you waiting for some greater need for metric education? What does that have to do with this program?

Mr. BLAKEY. I am not emphasizing that, except hopefully to make a point. Both programs have needs. They may not always, however, remain at the same level. So, if there were some flexibility for the Commission to add additional moneys to those programs at a time of great need, then that is one of the purposes of my suggestion.

Mr. BRADEMAS. Dr. Nowlis, do you see any time in the next 10 years when there is going to be, given the present state of law enforcement and health care and education, a radical geometric reduction in the use of alcohol and drugs by young people in our schools?

Ms. NOWLIS. I think it would take a very major revolution in the attitudes and values of society as a whole in order to bring about a drastic reduction. I think what we have to do is to help develop in young people the understanding, the information, the coping skills that will help them learn to live in this very complex, increasingly complex society that we are headed for.

Mr. BRADEMAS. I happen to think you are right, and unless Secretary Califano and Commissioner Boyer happen to be aware of some very major revolution coming around the corner in the next few years, and I must say I have not been privy to that forecast, then I think it is really shocking and fundamentally irresponsible to come in and ask for less money for this program for the next year than we have appropriated for this year and I am very distressed by your testimony.

Mr. Biaggi?

Mr. BIAGGI. No comment, Mr. Chairman.

Mr. JEFFORDS. May I ask a followup question related to that?

Mr. BRADEMAS. Mr. Jeffords?

Mr. JEFFORDS. I must say I have been less in touch with this than I was when I was attorney general in Vermont in the early seventies when the authorization figures were established here, and I would guess with some very rational objective. Can you tell me, given the amount of money we are talking about and the authorization of $34 million, if that is all we had to spend, and assuming we had that much to spend in this problem, is there any other place it would be better put than in the area which this act authorizes?

In other words, is there any other place you could put that amount of money to better help prevent the problems of drug and alcohol abuse? I know someone could say we could take $50 million or $100 billion and solve the social problems of the country, and perhaps have a better chance, but I am talking in terms of the money we have authorized here.

Ms. NOWLIS. I think we have finally come to terms with the fact that this is a complex problem, and there have to be complex solutions. Schools alone cannot do it. Law enforcement alone cannot do it. Treatment alone cannot do it, and I think there needs to be a balance.

I also believe that increasingly we have come to the realization that in the long run, efforts at prevention, whether it be of disease or destructive behavior or deviant behavior, will be more economical, but I would not like to see any one approach overemphasized.

Mr. JEFFORDS. Then you think the education is adequately emphasized now with this present appropriation of $2 million?

Ms. NOWLIS. I think there is a great deal more that could be done if we had more resources. I am not sure that I would want the $36 million.

Mr. JEFFORDS. How much would you want?

Ms. NOWLIS. I think that we could respond with the demand that we now have, the mechanisms we now have, the program we are now mounting, at the, oh, $6 million level. If we want to move on to other approaches, then it could take more.

Mr. JEFFORDS. Do you have any idea how much more?

Ms. NOWLIS. I have been too busy doing what I am doing to start designing programs that may or may not get funded.

Mr. BRADEMAS. By way of conclusion, I would just say that I hope in order to give the Commissioner more money to play with at his discretion, you would not torpedo a program for which you yourselves in your own testimony have made clear there is a very profound need in the American society, and the Commissioner is a very good friend of mine, as you know.

Thank you very much.

Next we shall hear from four persons, Mr. Nolan Estes, the general superintendent of the Dallas Independent School District in Dallas, Tex., James D. Kazen, director of the Center for Human Development with Trinity University, San Antonio, Tex., Mr. Luke Helm, assistant principal of the Du Sable High School in Chicago, and Mr. Donald Harman, sergeant, Salt Lake County sheriff's office, Salt Lake City, Utah.

We are very glad to have you with us, gentlemen, and just have seats and proceed. Mr. Estes is an old friend of this committee, going back over many years, and we are very glad to see you. I am especially pleased as the Representative in Congress of the Nation's No. 1 football team to see a couple of Texans in here today.

STATEMENT OF NOLAN ESTES, GENERAL SUPERINTENDENT, DALLAS INDEPENDENT SCHOOL DISTRICT, DALLAS, TEX.; JAMES D. KAZEN, DIRECTOR, CENTER FOR HUMAN DEVELOPMENT, TRINITY UNIVERSITY, SAN ANTONIO, TEX.; LUKE HELM, ASSISTANT PRINCIPAL, DU SABLE HIGH SCHOOL, CHICAGO, ILL.; AND DONALD HARMAN, SERGEANT, SALT LAKE COUNTY SHERIFF'S OFFICE, SALT LAKE CITY, UTAH

Mr. ESTES. Yes. Let me say at the outset I would like to make the record clear. Coming from Dallas, I want this committee, and particularly the chairman, to know that we hold no animosity toward what the visitors from South Bend did on January 2 in Dallas. We

want to make perfectly clear that we are aware of the fact that accidents do happen, and sometimes some people have all of the luck.

I am Nolan Estes, the superintendent of schools in Dallas, Tex. We have 181 campuses, 352 square miles. We have 13,000 people providing an education for some 140,000 students on a budget that exceeds $250 million.

I am also currently serving on the Council of Great City Schools, representing 28 of the largest city systems, some 5 million boys and girls. About 3 million of those are minorities.

I would like to thank the members of this committee, and particularly the chairman, for your leadership in the field of education. Mr. Chairman, we in the field are very much aware of the fact that we have no finer friend on Capitol Hill than we have in you, and we appreciate your statesmanship, your leadership.

Particularly, I would mention that the Alcohol and Drug Abuse Education Act, P.L. 94-142 will go down as one of the best laws passed by Congress. It has more potential for bringing about change in American education than virtually any other bill we have seen come down the pike. We want to express our appreciation to you for it. We are aware of your leadership in the Elementary and Secondary School Education Act, along with Carl Perkins. We know that you are the father of NIA, and we appreciate this leadership.

I think in the next decade the National Institute will come of age, and we will see some significant gains as a result therefrom.

Mr. BRADEMAS. Thank you.

Mr. ESTES. I am passing out copies of my testimony. I will not read that, if it is all right with you. You have the facilities, even in South Bend, for deciphering and decoding, so we will let you read that.

Let me summarize quickly, and if you have questions, I would be glad to answer them.

As you stated in the beginning, drug use and abuse is not a new phenomenon. Obviously, it is one where we are constantly meeting some severe problems. Both young and old turn to drugs for a variety of reasons, as you are well aware. We really consider it a people problem and not a substance problem. We think it ought to be defined in terms of people living in a complex society rather than a pharmaceutical problem.

It has been our experience that nondrug users choose not to use drugs because of positive feelings rather than negative feelings. Former drug users have stopped using drugs because they have found something else superior to continuation of their drug lifestyle rather than legislation, fear of imprisonment, or other reasons.

This being the case, our program in Dallas is one built on a positive prevention concept. We think that that holds great hope to helping solve the dilemma we are facing. Drug abuse prevention efforts ought to seek to improve the quality on nondrug life experiences, and of course we are moving in that direction.

Very briefly, our program started in 1970. We had a blue ribbon citizens' committee, some 50 individuals from our community, made up of psychiatrists, medical doctors, ministers, other professionals, as well as lay citizens, do a rather intensive and extensive study of the problems we were facing.

They recommended, among other things, that we develop a rather innovative, creative program that would provide a preventive approach

to combating the increasing use of drugs in our city. The resulting program was a school-based effort that emphasized underlying psychological processes that lead to drug abuse.

Of course, our model does provide a great deal of information. However, the main thrust is on teaching personal adjustment. It emphasizes prevention in four ways. One, it provides alternative coping skills for young people. It trains educators to help young people in developing appropriate life skills. It uses peer influence under carefully controlled situations, and it is designed—and I think this Committee will appreciate this—it is designed to phase out the need for outside support.

The heart of our program, as Tom Minter mentioned a while ago, is, of course, our 42 prevention and intervention teams. These were financed initially by the U.S. Office of Education under this act. Of course, they are being funded under local educational agency funding.

Incidentally, this does represent the largest concentration of trained intervention teams in the United States, some 42 different teams. We have a team in each one of our secondary schools, both junior high and senior high. The team generally on the average consists of about 10 people. We have a principal, we have two or three counselors, and we have a department head, a resource teacher, as well as other teachers, involved.

Thus far, we have trained almost 500 of our professionals in the school district, over 80 counselors, 40 administrators, over 300 teachers. First, of course, they go through a 10-day to 2-week training session. We follow that up with a 4-day session. Thus far, over 90 percent of our 4,000 sceondary school teachers have been in a training session led by these people who have been trained thus far. It has impacted on 70,000 secondary school students. This year we will move down into the elementary schools.

As you know, drug use and abuse is occurring at earlier and earlier ages.

We have, in addition, in our program now trained over 500 high school students to provide training, and this year we are focusing on training of trainers. That is, we are now becoming self sufficient, requiring less and less outside funding. We have 30 trainers on our staff now who are competent and equipped to train trainers in the program.

I would say that indeed there is an abundance of evidence that suggests that we have not had any program that has provided greater dividends than this program. There are several phases that I would mention hurriedly.

One, our 10-day training sessions, as has been indicated before, involve, of course, all members of the team working together. It includes 10 hours of action to provide training on conflict management and crisis management, as well as helps our teachers learn to cope with not only their own stresses and problems, but to work with others. The key, of course, is a team of professionals from each of our school campuses pooling their resources and skills to develop strategies for handling problems in their local schools. There is a broad range of activities provided by these teams.

Then, in our local schools, including, of course, counseling, both individual and group counseling, peer counseling, introduction to a variety of alternatives to drug abuse, training for purposes of clarifying values and improving communication and providing drug information.

We do not have definitive evaluation results. It is very difficult, as you know, to measure scientifically the results, but our teachers, our principals, our counselors, and others indicate there is a significant improvement in attitude toward drug use and abuse, and particularly in overall behavior in general.

In addition to this sort of improvement in attitude, let me say there are a number of spinoff values. As this committee may know, April 7, 1 year ago, the Federal District Court handed down a major massive desegregation order in our school district. It involved transporting 30,000 students on motorized attendance modules. It involved transferring a quarter of the faculty, opening 12 new schools, total reorganition of the entire district. The Los Angeles Times asked the U.S. Justice Department at the end of the year how we had done in Dallas with regard to implementing the desegregation order. The Justice Department says, it is unparalleled in the United States. Our Federal District Judge said, it is unbelievable the progress we have had.

We attribute that to three things. One, we have a landmark decision. It is an educationally sound court order. Second, the business community believes the schools represent the flagship of the community, and wherever the schools go, the community goes with them. Third, our intervention teams played a key role in bringing about our successful transition in the desegregation effort. I would say if there was any one thing that helped us to staff, it was these 42 trained teams that assisted in bringing about peaceful and very successful desegregation.

There are other spinoff values. The intervention teams in local schools represent, I think, the best strategy for bringing about change at the local level that I have seen. If there are problems with discipline, the teams provide the leadership. If there are problems with decisionmaking or individualization, or in one case one school had a problem with tardiness, the intervention team provided the leadership to help solve that problem.

We do have reduced discipline problems. Our discipline problems are down by 30 to 40 percent. The suspension rate is down significantly as a result of this. It has even served as a model to develop our new magnet school program for human services. Again, no program, in my estimation, has been more successful.

I think the future, the potential for this program is extremely great. Our recommendations would be that the Federal Government continue, not only continue, but hopefully expand the funding of this program, maintaining and expanding our regional training and resource centers. It seems to me if we have the money to put a man in outer space, we ought to have the money to put a boy on his feet, if I may paraphrase.

A $500 billion budget ought to provide more than a measly $2 million for such an important program. I think there is an abundance of evidence suggesting that this program has been successful; not only successful, I think it is cost effective, and the $6 million mark that was suggested I think would be a very good beginning, providing there is discretionary funds earmarked a high priority of use by the Commissioner.

We would recommend you provide forward funding for this program. I do not know how our title VII staff in San Antonio has worked as effectively as they have. Indeed, they have provided the stimulus.

Jim Kazen has done unusaully fine work with us in providing the leadership we needed to move in this direction. I don't know

how they have worked as effectively as they have, going from month to month not knowing what the funding level was going to be. So, I would recommend very highly that we put this on a sound basis and provide forward funding, making sure that local educational agencies have optimum authority to assess needs, assign priorities, and provide assistance for continuing the program once outside funding is no longer available.

In summary, then, let me say that I think it is somewhat tragic that probably in the bowels of the bureaucracy, GS–13's and GS–14's are developing position papers about the need for a program such as this, redefining the need, reanalyzing, rediscovering the wheel, when we have for several years now mounted a very successful effort, and unfortunately, it appears to me that we are going to have inadequate funding in order to continue it.

I would urge this committee to take aggressive action in moving forward as we undertake to solve one of our Nation's most difficult problems.

Thank you, sir.

Mr. BRADEMAS. Thank you very much, Mr. Estes.

[The prepared statement of Nolan Estes follows:]

Testimony on Alcohol and Drug Abuse Education Act

Subcommittee on Select Education

January 24, 1978

General Superintendent

Dallas (Texas) Independent School District

Introduction

Although the use and abuse of drugs is not a new phenomenon, today, perhaps more than ever before in the history of man, we live in a drug using society. Young and old alike turn to drugs to meet a variety of medical, psychological and recreational needs.

It is little wonder that drug and alcohol abuse is wide-spread among youth when many parents and other adult role models rely heavily on drugs to get to sleep, to wake up, to lose weight, to curb nervousness, to be social, and on and on. Television commercials also suggest that there's a pill to pop to solve every problem a human being might encounter. Soap operas, TV series and movies also glamorize drug and alcohol usage, making it appear to be the "in thing" to do. Add to this the pressures and stresses of today's complex society coupled with always prevalent peer pressure, and it's little wonder that many teenagers and even younger children become involved with and dependent on drugs and alcohol.

Actually the drug problem is really a people problem rather than a substance problem. It should be defined in terms of people living and growing in a complex society rather than in terms of drugs as pharmacological agents. Research suggests that non-drug abusers choose not to abuse drugs because of positive feelings about themselves and their lives rather than negative feelings, such as fear of brain damage or getting busted. Former drug users stopped using drugs

because they found something else superior to the continuation of the drug lifestyle rather than legislation, fear of imprisonment or failing health due to drug abuse.

Since this is true, it follows that a positive prevention program provides the answer to the dilemma. Drug abuse prevention efforts should seek to improve the quality of non-drug life experience and make drug use seem a less appealing option for the consumer. Simply put, it should lead the young person to decide for himself that a straight life will be much more satisfying and rewarding to him than a "stoned" life.

The Dallas Program

The Dallas program had its initial beginnings in 1970 when an ad hoc committee for drug prevention was established by the citizens of Dallas. The committee recommended that the Dallas Independent School District explore the possibility of creating an innovative program that would provide a long range preventive approach to combat the trend toward increased drug abuse among young people.

Preliminary research revealed that:

1. Drug education efforts that stressed factual information about drugs had little value in deterring drug abuse by young people.
2. Young people frequently had more information, and misinformation, about drugs available to them through peers and street knowledge than that provided by teachers.
3. Drug abusing young people frequently turned to drugs because they had run out of viable options or alternatives in adjusting to their life stress.

4. Peer influence was a major contributing factor in drug experimentation and drug abuse by students.

Armed with these facts, the Dallas Independent School District developed a school-based approach for the prevention of drug abuse which emphasizes the underlying psychological processes that lead to drug abuse. While the Dallas School Team Model includes facts about drugs, the main thrust is on teaching personal adjustment.

The program provides a model that emphasizes prevention in the following four ways:

1. Provides young people with a greater variety of alternatives in coping with their life stresses.
2. Trains school administrators, counselors, teachers, and support personnel in techniques designed to assist young people in expanding their life skills.
3. Uses the recognized impact of peer influence by developing teams of students to conduct youth-to-youth sessions designed to provide positive and constructive peer influence.
4. Makes provision for gradually phasing out the necessity for external funding and assistance by developing local school district resources of personnel and students. The program is not only designed to perpetuate the innovative approaches already developed but to expand the drug prevention efforts through use of local resources.

At the heart of the DISD program, financed by the U. S. Office of Education and local funds, are 42 school-based prevention and intervention teams, which, incidentally, represent the largest concentration of trained teams in the United States.

The average team has 10 professionals, including two counselors, one administrator and seven teachers. In all, some 80 counselors, 40 administrators and 300 teachers have been involved in 10-day training programs in retreat settings and 4-day follow-up sessions. Approximately 90 percent of all secondary school staffs have attended team-sponsored staff development sessions.

About 60,000 or 30 percent of students enrolled in secondary schools during the past three years have been impacted by the teams. The program is projected to reach 63,648 secondary school students during the 1977-78 school year and about 1,500 elementary students during the 1978-79 school year. In addition, approximately 500 high school students have been trained to work with their peers and younger students.

Problem-Solving Related Training

All intervention program training teaches participants, first of all, to cope and deal with their own problems and then with the problems of others. Professionals learn and conquer skills to both model and utilize while teaching others. The 10-day training cycle retreats include at least 10 hours in action planning procedures. On-going action planning, then, becomes a natural part of intervention team procedures. Since an entire team goes through training together, members learn to work effectively as a unit and to utilize the unique resources of each team member in solving problems. Also included is specific training in conflict resolution and confrontation skills.

Team members receive basic training in needs assessment, problem identification, resource development, planning and evaluation techniques. Communication and group dynamic principles are also presented. Teams are assisted in applying their newly acquired skills in developing a re-entry plan of action to initiate the program in their home school setting. They identify strategies for entry or access to all school populations and sub-groups. They return armed with a plan of action with a concensus of purpose and a reasonable probability of success.

Alcohol peer education teams learn to specifically teach decision-making skills to middle school students. Problem-solving and decision-making skills have also been implemented in the health curriculum.

An important element to the overall program is that each team operates as an independent entity in its unique school setting. This arrangement is conducive to the development of creative approaches to meet the needs of the particular student body.

Continued growth is accomplished through an overall organization that permits and encourages coordination of efforts among separate school teams. Mutual assistance is encouraged, and the opportunity for cross-fertilization of ideas and talents across teams and schools adds a great deal of mutual support, encouragement and sharing of workable ideas.

The Program

The overall purpose of the school-based leadership team is to address the educational and developmental needs of youth. Specifically, the goal of this program is to train and develop early intervention and prevention programs for secondary students. Ultimately, the aim of the program is to prevent self-defeating and disruptive behavior, particularly drug abuse behavior among young people.

The program includes a broad range of activities.

1. Counseling for student groups as well as individuals
2. Peer counseling with appropriate leadership training
3. Introduction to a variety of intellectual, social, cultural, recreational, career and other alternatives to drug abuse
4. Training for the purpose of clarifying values, improving communication, coping and problem-solving skills
5. Drug information service for teachers, students and parents, including teacher and adult education

An example of the effectiveness of the program is demonstrated by the case of a young man who was heavily involved in drugs. He was not attending school and separated from his family. As a result of being involved with one of the teams working on life skills, he got off drugs and established some realistic and worthwhile goals for his life. Currently he is a sophomore in college and is actively involved in his community while pursuing a career in social work.

Another example is that of a family experiencing numerous problems because of a lack of communication. After working with a team that held meetings after school hours for parents and students, not only were family members able to solve their own problems, they are now working with other families in improving home relationships.

Impact On Other Areas

Results have been exciting in observable changes in attitudes. More students are involved in constructive community service-type of activities, recreational and structures extra curricular activities than ever before. Although team members have not received any additional pay, members stay with the program because they believe it is worthwhile and is also helpful to them in their daily classroom work. Dallas has also provided a model with numerous personnel from other school districts writing for information and coming to visit to see the program in action. While success is difficult to measure scientifically (how do you prove a student did not get involved in drugs as a result of the program?), principals, counselors and teachers report noticeable improvements in attitudes toward drug usage and behavior in general.

Also exciting is the fact that benefits of the program spill over into numerous other areas.

A case in point is the Dallas schools' Affirmative Action Program. A federal court order instructed the school district to eliminate all vestiges of institutional racism both in the school district and in the community. Fortunately the intervention program was already in effect and provided workable approaches in striving toward this goal.

The program also shows much promise in assisting in reducing school discipline problems, a nation-wide concern. Worthy of mention in this area, are three programs currently being developed in the DISD. The Status Offender Program in connection with the State Criminal Justice Program is designed to assist students who are chronically absent or runaways. A LEAA grant, in conjunction with the Law Enforcement Administration Agency and the Dallas County government, will provide funds to work with students to keep them out of the criminal justice system. The third area is the establishment of a model school community guidance center which will work with students anywhere from one day to a month in affective and cognitive skill development to get students back in mainstream education and divert them from criminal behavior.

Various departments have requested training sessions. Sessions have been conducted for central staff administrators, principals, counselors and student teachers.

Some examples of programs developed by individual schools include:

--communication courses for all sophomores at David W. Carter High School

--Peer counseling at T. W. Browne Middle School

--School Buddy System at W. H. Gaston Middle School

--Parent-student groups at J. L. Long Middle School

The philosophy of the program has been reflected in the programmatic aspects of the Human Services Center, a magnet high school which opened in the fall of 1977.

Implications For Future Directions In Education

This program has significant implications for future directions and for solving current problems in education.

1. The Intervention Program Resource Center provides DISD personnel with the latest drug information and the latest developments and resources in the affective education domain.
2. The program encourages teams and schools to develop activities and strategies to provide students with alternatives.
3. The program trains personnel to deal with discipline in a positive manner.
4. The program stresses the concept that faculties are "communities" and that they have tremendous resources within each school to deal with school-related problems.
5. The program stresses training for teachers in the affective domain so that they can teach effective living skills to their students.
6. The program has been developed and is continuing to develop a curriculum centered around decision-making, communication and problem-solving skills.

Recommendations For The Role Of The Federal Government

The Dallas program is a refreshing example of how federal dollars can be effectively used as seed money by a local district to develop and implement its own self-sustaining efforts. This is in lieu of relying on increased federal spending that supplants local initiative and efforts rather than supplementing it. The Dallas program is not dependent on outside funding for its continued existence, and this is as it should be.

I believe it is critical that the role of the federal government in drug and alcohol abuse education include the following provisions:

1. Federal funds should provide
   (1) Regional training centers
   (2) Resource centers
2. Legislation should provide continuous and advance funding in order that long-range plans may be made.
3. Local officials must be given the authority to identify needs and plan programs to meet the specific, local situation.
4. School districts should be assisted and encouraged in developing programs which will be self-perpetuating and can continue when federal monies are no longer available.

Mr. BRADEMAS. Mr. Kazen?

To reiterate, gentlemen, if you could summarize your statements, that would be very helpful.

Mr. KAZEN. Mr. Chairman, I am James D. Kazen, the regional director of the Region 7 Center, which is funded by the Office of Education, of Trinity University. I am going to summarize my statement, of which I think you have a copy. I will direct most of my remarks to the regional training centers, which I am representing here today, although I might at times draw on my years of experience.

I began dealing with the problems of drug abuse and alcohol abuse as an enforcement officer. I moved from there to funding treatment centers, and for the last 7 years I have been involved in drug education and prevention. I have never seen an approach work as successsfully as this, and for my benefit, for the morale of those of us who work in this field and have been fighting this forest fire with a bucket of water over the years, I don't know what contribution I could make to your decision this morning, but just hearing you gentlemen speak in asking your question has done more for my morale and for the morale of those to whom I will go back and deliver the message. It has made our trip worthwhile.

As Dr. Estes said, I think we have gotten to the point where we can explain this problem from every kind of conceivable angle. I have even heard people quoting me on things that I said 10 years ago, that I discarded 10 years ago.

There is a program that works very well, and it is funded through this Alcohol and Drug Abuse Education Act. Through it, we have been able to give the skills to literally thousands of people to solve their own problems. The power originated with the passage and extension of the Alcohol and Drug Abuse Education Act, and I think its future is too important to be described in clever, confusing, or subtle terms.

I would like to quote Hubert Humphrey, who said about people who come and are not clear about what they want:

> They never quite get around to saying where they are or who they are or what they are, what they want, where they have been, or where they are going. We have to make some judgments. We just can't keep waiting for more evidence.

I hope when this panel concludes you will have a clear idea of where we have been and what we need. This program is different from others. I think there are statistics I quoted in the paper which show just how cost effective it really is. With a very small amount of money, between $5,000 and $7,000, we are able to impact literally thousands of students and teachers.

The facts, of course, don't prove much, but there are some implications which can be drawn from them, and I would call your attention to my written testimony of the numbers of people and the moneys that have been raised locally by school teams and community teams. In one period alone, in excess of $3 million they raised to fund themselves. Most of the important experiences, I think, that truly educate are predicated on sound ideas, and this program is no exception to that. I think there is only one way a person acquires a new idea, and that is by the combination or association of two or more ideas he already has into a new juxtaposition in such a manner as to discover a relationship among them of which he was not previously aware.

I think this program can be described then through a number of these ideas: That we are not helpless in the face of this problem unless we choose to be; that a team of individuals of complementing strengths are more effective than individuals working alone; that there really is no such thing as a drug or alcohol problem; that there are problems people are having with drugs which makes it a people problem; that good drug and alcohol prevention is really good parenting, good teaching, and good modeling in whatever we are about; that drug and alcohol abuse, crime in the school, child abuse, in fact, all complex human problems, begin with an individual who is unable or unwilling to cope with what is going on in his or her life; that coping of problems of disruptive behavior do not affect two or three out of every five persons, but one out of one.

If I were to answer your question, Mr. Chairman, about how many young people are experimenting, I would say it is one out of one. There are extraordinary possibilities in ordinary people.

Further, that when a family or school or community cannot solve their own problems, it is not likely to be solved by Government intervention; that we serve as guides to the young only to the extent our own rhetoric and behavior are consistent; that solutions to problems of human interaction begin with a sense of community, that each man, each woman, and especially each child is capable of fantastic growth.

These are not ideas you will find literally in our training designs, but they are ideas we hope to convey to people who come into training. People who have come to us for training are not really prepared for what they receive, I do not believe. When they first get there, they think they will get some answer. Instead of getting an answer, the first thing we ask them to do is focus on what they are doing there, what they are going to be doing as helpers in this problem.

You are very well aware that historically alcohol and drug abuse prevention in the sense we are defining it this morning has never obtained a very high priority. We talked about budgeting this morning, and I have said in the past that from the standpoint of the centers, we have moved from zero-based budgeting to no base budgeting. We don't know from year to year exactly where we are.

I have seen trained staff members take 2 and 3 years to really develop into a fine trainer, have to be cut for lack of money. We have ridden on buses to get to teams because there is not enough money to fly there. We have had people in teams and communities say they will come to the training and pay their own way because there is not enough money to fund them.

The State of Utah alone in 1 year submitted over 200 applications for training —200 applications for two possible training slots. The program, when it shifted to school-based teams exclusively from community teams, in 1974—our big task was to convince superintendents of big school districts and educators that this solution would really work.

I think if there is any important testimony to be heard, it is from the superintendents and principals in this country who are standing in line saying, this program really does work. What we and the schools together learned, regional training centers and the schools, is that it does not take much strength to do things, but it takes great strength to decide what to do.

The focus of our training in the 2 weeks is to develop an action plan, to go back home and do something, to do something about the problem, to begin with oneself as a teacher, as a role model, and do something, and from there impact the students for which we are responsible. For many teams, then, the first step was, and I think still is, to focus on improving their own skills as teachers, counselors, and administrators. I don't believe many of us are still looking for a single answer to this problem. What the training centers really represent is not the answer but one answer. There is always serendipity, and the story of the three princes who went out to look for something and couldn't find what they were looking for but found things just as valuable applies.

When our budget restrictions were restricted, we came up with a clustering of teams. We had to do it. We didn't have enough money to reach the teams, so we combined large school districts into clusters of four or more teams, and we were able, as Dr. Estes pointed out, to be very cost efficient and to impact major urban areas.

When we spend 20 days in the field away from our own families, our own families begin to deteriorate, and we forget, I think, as helpers, while we are out saving the rest of the world, the problem is very real in our own families, so we in the regional training centers developed a family approach, how to get our own families involved in what it is we do, and out of that came the National Family Demonstration Program, which we were not funded to do, but we have since trained 500 families to be the basic prevention units themselves, to impact other families in dealing with life.

Always our goal has been to provide the skills to schools to solve their own problems. We are not interested in developing dependent relationships, and I think Dallas is a beautiful example of what grew out of one team is now 42 teams with our own group of trainers that we even borrow to train at the regional level.

A modest amount of money invested directly at the front lines of battle enables local people to solve local problems without a lasting dependence on outside assistance.

The Alcohol and Drug Abuse Education Act, in my opinion, must be given new life. It should be expanded to improve its effectiveness to a larger number of people. I wish the majority of families and schools could provide children with a safe, secure environment, and the means to make the positive decisions about their future lives. That is my wish, and I believe we are never given a wish without also being given the power to make it come true.

You and I, however, may have to continue to work for it. There is still an ample number of bad ideas for altering one's central nervous system. Ideas will not go to jail. In the long run, the only sure weapon against bad ideas are better ideas. The legislation contains better ideas, and there are many of us who have tried faithfully to adhere to it.

I think the job has been done well for the last 7 years, in New York, Chicago, Miami, California, and Texas. We seek the greatest reward for doing this job well, the opportunity to do more.

Thank you very much, Mr. Chairman.

Mr. Brademas. Thank you very much, Mr. Kazen.

[Prepared statement of James Kazen follows:]

Testimony of James D. Kazen, Director, Regional Training Center, Trinity University, San Antonio, Tex.

My name is James D Kazen and I am the Director of the Regional Training Center funded by the Office of Education under a contract to Trinity University in San Antonio, Texas. The Trinity Center is one of five regional centers created in 1971 by monies appropriated under the Alcohol and Drug Abuse Education Act. My remarks today will focus on the activities of the USOE National Training Network and will also include observations formed over fifteen years as I have moved from designing enforcement strategies, to treatment modalities, to prevention and education.

The subject of alcohol and drug abuse still commands a large share of emotional rhetoric, although much of the hysteria of the sixties has subsided. There are now so many studies and opinions on every aspect of the causes and prevention of this problem that we seem to have reached the point of explaining everything and understanding nothing. Sometimes even expert opinion is contradictory and confusing. I don't consider myself an expert -- only one who has gained a certain knowledge from working at implementing an idea. I realize that any piece of knowledge I acquire today has value at this moment exactly proportionally to my skill to deal with it. Over the past seven years, at every level, we have acquired new knowledge and developed the skills to go with it. These skills have been passed on through training to thousands of people. We now have the power

not only to endure the problem, but to prevail. The power originated with the passage and extension of the Alcohol and Drug Abuse Educatoin Act and its future is too important to be described in cleaver, confusing or subtle terms. Wahtever my contribution to your decision may be, I wish not to be included in the group of people Hubert Humphrey once described, "They never quite get around to saying where they are, or who they are, or what they are, what they want, where they have been and where they are going. We have to make some judgments: We just can't keep waiting for more evidence."

The philosophy of the National Training System is best articulated by Dr. Helen Nowlis who came to the Office of Education from the University of Rochester. Her concept was to develop a system of resource and training centers which could respond nationally to thousands of rural and urban communities.

These Centers were staffed by people who saw their jobs as a series of great opportunities brilliantly disguised as insoluble problems. Utilizing an interdisciplinary 'school team' approach and an agressive on-site support program, Center-trained teams of five to seven individuals began in 1972 to energize entire communities to action. The National Data Bank located in Chicago, has facts and statistics on what happened to those teams after training.

Of course, impressive as they may be, facts as such, never settle anything. It is the implications that can be drawn from facts that count. Consider then the implication of these statistics gathered during only one period from July 1976 through March 1977. During this time, a total of 66,214 parent/adults were impacted nationally by 322 teams for an average of 204 parent/adults per team. During the same period, 433,422 youth and students were impacted. With an average per team expenditure of approximately $7,000 (which includes travel and per diem for two weeks of residential training at the Centers), these teams were able to generate project funds at the local level totalling in excess of $3,000,000. Considering the innovative programs developed locally, the number of people impacted and the costs involved, this effort is a great national bargain.

Most of the important experiences that truly educate are predicated on a sound idea. What really separates this National Program from other efforts is the total commitment by people who witnessed the birth of this idea and made it operational. In a human relay, the idea has gained strength so that what was said by a few is now repeated by many. The one idea contains many ideas. After all, there is only one way in which a person acquires a new idea: By the combination or association of two or more ideas he already has into a new juxtaposition in such a manner as to discover

a relationship among them of which he was not previously aware. The idea

-- that we are not helpless in the face of this problem unless we chose to be,
-- that a team of individuals of complimenting strengths are more effective than individuals working alone,
-- that there really is no such thing as a drug or alcohol problem,
-- that there are problems PEOPLE are having with drugs which makes it a PEOPLE problem,
-- that good drug and alcohol prevention is really good parenting, good teaching and good modeling in whatever we're about,
-- that drug and alcohol abuse, crime in the schools, child abuse--in fact, all complex human problems--begin with an individual who is unable or unwilling to cope with what's going on in his or her life,
-- that coping with problems of disruptive behavior do not affect two or three out of every five persons, but one out of one,
-- that there are extraordinary possibilies in ordinary people,
-- that when a family or a school or a community cannot solve their own problems, it is not likely to be solved by government intervention,

-- that we serve as guides to the young only to the extent our own rhetoric and behavior is consistent,
-- that solutions to problems of human interaction begin with a sense of community,
-- that each man, each woman and especially each child are capable of fantastic growth.

This, in essence, is our message to participants. How eloquently they interpret the idea is best left to their own testimony.

Historically, alcohol and drug abuse prevention has never attained a very high national priority. Each year, appropriations for this program have become more scarce, even while results continued to show the effort was effectively dealing with the causes of the problem. Center staffs were reduced and we found ourselves implementing larger scopes of work with less resources. Advance planning varied from zero-base budgeting to no-base budgeting. The demand for training and technical assistance, however, grew in spite of money limitations. The State of Utah along submitted over 200 applications one year -- that is 200 requests from schools and communities competing with each other for two funded slots.

When the program shifted to responding to school-based teams exclusively, our first task was to win the confidence of the public school administrators. By 1974, many of these administrators were weary of innovative solutions and highly skpetical of any training that required their participation. There attitude was understandable. Schools were taking the risk that governments and other institutions could not assume. They were expected to seek new ways of attacking basic human problems. Unfortunately, in too many quarters, schools were being thought of as publically supported child rearing services. Nervous parents, law enforcement officers, pressured government officials at all levels were demanding that schools find some words to the wise on the subject of drug and alcohol abuse. Alas, as the schools knew by now, a word to the wise is not enough if it doesn't make any sense. Most districts had tried every approach that experts and well-paid consultants could recommend -- expensive films, scare tatics, and a parade of ex-addicts to tell war stories to the children. We forgot Harry Truman's warning, "You don't set a fox to watching the chickens just because he has a lot of experience in the henhouse." The old strategies, while having limited success, were mostly counter-productive. The schools and the Regional Training Centers collaborated in the implementation of the idea and a new page in prevention

was written. What we and the school teams learned together was that it doesn't take much strength to do things, but it requires great strength to decide what to do. I am not an educational theorist, but I think, in education, the closeness of students to a good man or woman is the best we can offer our children. For many teams, then, the first step was and still is to focus on improving their own skills as teachers, counselors and administrators.

I don't believe many of us are still looking for a single answer to this problem. What I have been describing here is not THE answer, but AN answer. There is always serendipity. I remember 'The Three Princes of Serendip" who went out looking for treasure. They didn't find what they were looking for either, but they kept finding things just as valuable. That's serendipity, and our business is full of it. When budget restrictions reduced the numbers of schools we could impact, we concentrated our efforts in large urban school districts and developed a new approach of training clusters of teams. When the demands of the job tore at the fabric of our own families, we developed a family training design that stabilized our situation and produced a national demonstration program aimed at training the family as the basic prevention unit.

Always our goal has been to provide the skills to schools to solve their own problems. We are not interested in developing dependent relationships. One major urban district which has developed full capacity for handling problems of disruptive behavior is the Dallas Independent School District. Beginning in 1972 with one team, the district now has active teams in 42 secondary schools, a large cadre of trainers trained by the Regional Training Center, and a delivery system all its own. That is a true success story and one typical of this program. A modest amount of money, invested directly at the front line of battle, enabling local people to solve local problems without a lasting dependence on outside assistance.

The Alcohol and Drug Abuse Education Act must be given new life. It should be expanded to prove its effectiveness to a larger number of people. I wish the majority of families and schools could provide children with a safe, secure environment and the means to make the positive decisions about their future lives. That is my wish, and I believe we are never given a wish without also being given the power to make it true. You and I, however, may have to continue to work for it. There are still an ample number of bad ideas for altering one's central nervous system. Ideas won't

go to jail. In the long run, the only sure weapon against bad ideas are better ideas. The legislation contains better ideas and there are many of us who have tried faithfully to adhere to them. I think the job has been done well for the past seven years in New York, in Chicago, in Miami, in California and in Texas. We seek the greatest reward for doing this job well -- the opportunity to do more.

Mr. BRADEMAS. Mr. Helm?

Mr. HELM. Yes, Mr. Chairman, Congressmen, thank you for the invitation to be here.

I would like to say that I differ from my colleagues here in that this is our first experience with the program in Chicago, in the ghetto area. We are from the largest housing project in the world, Robert Taylor project. All of our schools, of which there are some 16 in our district, 13 are 100 percent black. A few statements which characterize some of the things which go on there, in terms of powerlessness, despair, oppression, make our children easy prey for alcohol and drugs.

We have a particular problem in that the pimp and the pusher represent material wealth, power, and role models for identification.

We took 22 teachers, counselors, and administrators to the region 5 training center back in October. Our district is surrounded by a number of universities. We have been studied, restudied, understudied, and overstudied as to what the black child is like. Therefore, I took some very cynical teachers with me. They don't like the University of Chicago. They don't like IIT, and they don't like the other groups who have studied us and given us no answers.

Here, being on the front line, I tell you right now the use of drugs in our community is down, the use of alcohol is up. The reason is, our children cannot afford hard stuff, but they have learned how to cut their pot with embalming fluid. They have learned to do some very inventive things to increase that particular high. One of the things we got out of our training session was that you cannot—cannot—take something from youngsters that is by way of prevention, drugs or alcohol, without replacing it with an alternative.

The key to the entire program is alternatives. We are about the business of providing alternatives for our children, using our own indigenous resources in our communities. Each one of our schools, of which they are 4, a high school, some 2,700 youngsters, and 3 elementary schools comprising 1,100 to 1,200 children each, which is in my statement, sir.

Our children and our teachers have now become involved in the formulation and carrying out of programs. We met with our community resource agencies and asked them to ante up. We found there are a lot of things being done in terms of people working at cross-purposes and duplication of effort. We have attempted to stratify that. That is also in the statement, sir.

As cluster director, I am responsible for coordinating that team of four schools, one of which has a preschool component. We came up with something we didn't learn in region 5, and that is, if we get them before they can darn near walk, we have a better chance of prevention, period.

We finished our training in October 1977. Our teams are moving forward with the programs. We have taken music programs which are no longer funded, and teachers, and activated them on their own time. Elementary schools, which used to have intramural basketball programs, which are now defunct, have been reactivated through the activities of our teams. We did learn that if leadership is not provided, and alternatives are not provided, we have given our children up to the pushers, and since none of us is equipped in that particular area to go grab a pusher out of his car and beat him up, we

have decided that maybe our approach, the approach we learned during training, is the best one to go with; that is, the provision of alternatives.

That requires a great amount of work, and the work, I would say, that our teams are doing is in coming up with creative new ideas based on what is already available in their district.

I would urge you, sir, and the committee, to help us in terms of funding us to carry on our work. We just started in October, and we just got into this. I am concerned with what is going on in Dallas. I am concerned, and I think it is remarkable. However, we have 6,000 children, and that is just in four of our schools, 6,000 children in four schools, and we have, as I said, 15, and that is in one district in Chicago. We are very, very large. I am sure you are aware of that. This is a drop in the bucket, but I want to take that drop in the bucket, develcp it, refine it, hone it, and maybe we can come up with something that Dallas has.

As you know, in the city of Chicago we refer to our board of education as Puzzle Palace, because they have been sued, resued, and undersued. We have integration and everything else. We are in what I would consider to be a time of turmoil in terms of teacher integration. No one knows what is going on or how it is going to happen. We don't know if we are going to have the same teachers today we had yesterday in our schools. That is part of the problem. I would like to talk to whoever said something about integration of faculties, but that is neither here nor there.

You asked, sir, in your original questioning—I am sorry. You asked me to summarize, and it would have been better if I had read the statement.

[General laughter.]

Mr. BRADEMAS. You are doing all right.

Mr. HELM. You asked about some numbers. I would like to give you a few. In our high school, we have at least 1,050—you said extrapolate, and that is what I am doing. We have at least 1,050 youngsters who are either using or have experimented with some drugs and/or alcohol. Around Christmastime, it does smell like a vineyard. In our elementary schools, we have alcoholic youngsters at the age of 9, 10, 12. Comprising the four schools, that comes out to about 600 youngsters. I can give you some percentages, but that is neither here nor there.

In summary, I can wrap the whole thing up by saying the program we learned was to deal with the problems we have using what we've got to work with and presenting alternatives. The best statement I can make with regard to the whole thing is to reiterate one thing. You cannot take a piece of candy from a baby unless you give him something else to become involved in and interested in. That, sir, is what our program is all about, and I thank you.

Mr. BRADEMAS. Thank you very much.

[Prepared statement of Luke Helm follows:]

Prepared Statement of Luke Helm, Assistant Principal, DuSable High School, Chicago, Ill.

I appreciate the opportunity to speak before this sub-committee. My name is Luke Helm, and I am assistant Principal at DuSable High School in Chicago. I am responsible for coordinating the Board of Education District 13 Drug and Alcohol Abuse Prevention Program, sponsored by the U.S. Office of Education. This program encompasses four schools serving 6,000 students ranging from pre-school through high school ages. Approximately 80% of the student body, which is 100% Black, is drawn from the Robert Taylor Homes. This eight-block area is a highly mobile, low-income area constituting the largest public housing project in the United States.

The Drug and Alcohol Abuse Prevention Program is carried out in four schools by 22 teachers, counselors, administrators, and parents. These "teams" of people were trained during October 1977 in prevention and education methods at the Region 5 Training Center of the U.S. Office of Education's Alcohol and Drug Abuse Education Program. Schools in District 13 have had high incidence of alcohol and drug problems causing disruptions in classrooms, hallways, and cafeterias. These disruptions take faculty time and energy away from educational functions, necessitating their involvement in crisis intervention. In my teaching and administrative experiences in District 13, most efforts to cope with drug and alcohol problems have been limited, usually consisting of referrals to counselors on a crisis basis.

Since the training and development of our prevention and education action plans, the trained teams from these four schools have initiated an overall thrust to provide alternatives to drug and alcohol abuse, with the underlying belief that something better must be available to young people if they are to be deterred from destructive drug and alcohol use. That "something" takes many forms, including improved relationships, better feelings about themselves, having rewarding activities to pursue, and possessing rational decision-making skills, all of which make for a better quality of life. Among the kinds of alternatives being implemented in District 13 are peer counseling, music, sports, parent education, and coordination with other agencies in the community in an effort to provide more adequate services to the student.

Peer programs allow students to help fellow students solve problems or make decisions. Students trained to be peer counselors in programs across the country have demonstrated greater interest in school, better attitudes toward themselves and others[1], decreased problem behavior, better communication and understanding with parents[2], and greater achievement and initiative in academic matters[3]. At one high school in District 13, a group of students have formed an organization called "Alternatives". Their objectives are to become trained peer group counselors, to help with teacher in-service training in the area of prevention, and to raise funds for such programs.

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[1]Dunlap, V., "The Development and Analysis of a Peer Counseling Program at Patrick Henry High School." Walden University, Naples, Florida, 1973.
[2]Hamburg, B. and Varenhorst, B., "Peer Counseling in the Secondary Schools." American Journal of Orthopsychiatry, 1972, 42 (4): 566-581.
[3]Rubin, L., "Evaluative Report of Peer Counseling Project", Niles Township High School, Skokie, Illinois, 1975.

In two other schools within our district, music and sports are being used as catalysts to draw students into self-awareness programs geared toward prevention of desctructive alcohol and drug behaviors. One of those schools had no basketball team until the Region 5 trained team spearheaded its formation as a mechanism to reach otherwise disinterested youth. This has become a true alternative to drug and alcohol problems for youth in the area.

In a third school, a group of eighteen parents has begun meeting to learn their influence upon children through their own behavior and communication patterns. They are using a personal self-awareness program to enhance their relationships with their children.

Throughout the district, working links have been established with various groups through the Network of Community Agencies, so that coordination of prevention efforts can occur. Included in the Network are social services, hospitals, child-care and health services, the park district, police department, urban league, Girl Scouts, Job Corps, and many others.

The efforts of the District 13 teams have directly affected 125 students, 182 faculty members, and 108 parents in the short time these programs have been operating. All four schools have the support of their respective administrations to proceed with these and other prevention activities.

This is the first concerted effort in District 13 of the Chicago Board of Education to prevent alcohol and drug abuse. Several scattered

efforts among teachers have been tried in the past, some unsuccessfully because participating teachers had no continuing support. This program, by virtue of having interdisciplinary teams of faculty from four schools, keep the enthusiasm, interest, and skill development alive. Aside from the support among team members, the relationship with the Region 5 Training Center for technical assistance services will enhance the success of our on-going prevention efforts. This is one program where, when the federal funds run out, motivation to continue prevention activities will be sustained because of the technical assistance back-up and because teachers, administrators, counselors, and parents were brought together for training.

Our efforts are perceived by faculty and parents as concrete and realistic. In contrast to some other altruistic programs with high aims of rehabilitating all alcoholics and drug abusers, the effort of the District 13 program is on preventing those problems from arising in the first place.

Not only are we fortunate to have access to training and technical assistance in preventing drug and alcohol abuse problems, but we also believe that the particular mode of program offered by the U.S. Office of Education is exceptionally effective in helping us design and implement appropriate prevention strategies in our district. I hope that other schools districts may also have the opportunity to do the same.

Mr. JEFFORDS. Mr. Chairman, I must leave to go to another commitment, and I want to thank the witnesses I have already heard, and I assure the witnesses to follow that I will read their testimony. This is an area of deep concern to me, and I would ask that you pay special attention to Bill Butynski's testimony. Bill and I worked for a length of time on this problem in Vermont back in the dark ages of this legislation.

In particular, I would point out his testimony on page 2, which quotes President Carter on how much emphasis we should give to prevention and education. I think it is a very fine quote.

Mr. BRADEMAS. Very good. Thank you very much, Mr. Jeffords.

Mr. Harman?

Mr. HARMAN. Thank you, Mr. Chairman and members of the subcommittee.

I choose to read my statement, since summarizing it seems to take twice as long. It seems that these people have talked about the programs in schools. I would like to talk about the effect as a participant going through a program and some of the expanding effects it has had on me.

My name is Don Harman and I am a patrol sergeant with the Salt Lake County Sheriff's Office in Salt Lake City, Utah. I am here to testify about and voice support for the program of drug prevention education. It is sponsored by the U.S. Office of Education, Drug and Alcohol Training Resource Development Assistance Center.

In 1973, I was working in the Narcotics Division of the Salt Lake County Sheriff's Office. I was asked by a representative of the State Division of Drug and Alcohol to participate in a training program that was sponsored by the Office of Education called Help Communities Help Themselves. This training was to be held in San Antonio, Texas. At that time the Sheriff's Office had been actively involved in drug prevention education programs in schools and in the community. So, I was very eager to learn new skills and new techniques to deal with the drug problem, but more paramount at that time was the opportunity of going to a 2-week training school at San Antonio, Tex., where I had visions of golfing, riding horses, swimming, and maybe if there was some time, to learn about some programs that other people were using successfully.

When I arrived in San Antonio with my other six team members, it was a rude awakening to find out that we had come to work.

Our training program started at 8 o'clock in the morning and finished at about 10 o'clock every night, and even more outlandish, the bar closed at 8 pm. In the past I had gone to numerous training schools and seminars sponsored by State and Federal agencies. So, my first feeling was to rebel. After the first couple of days, I knew I was in a training program different than any other in which I had ever been involved.

I kept asking myself, "When are we going to start talking about drugs?" As the training program progressed, I soon realized the problem was not with the drugs, but rather why do people use them.

The first night we were there the trainer told us we were going to build a community, and build a community we did. The team from Salt Lake was all white. We were teamed with seven members of the Weber State University of Utah, and they were all black. This in itself was one of the greatest learning experiences of my life. The events and

frustrations that were experienced during those 2 weeks were too numerous to mention, but at the end of the 2 weeks, we were a community.

After I returned home, I knew that I had changed, and I liked the new me much better than the old. I never will forget a banner that was placed in the meetingroom. It said: "You are responsible for your own learning." In all my school years, no one had ever told me that. I always thought that this was the teacher's job.

Our team had designed an "action plan" suggesting that we implement drug prevention education programs in our schools. We soon found out that it was much easier to talk about this than to do it. We found out that programs are generally not successful when imposed on a a school system from the outside. A change to be effective is better initiated by someone who is a part of the system.

The Sheriff's Office has a lot of clout in our community. So, we approached the school board and asked them to support us in a drug prevention education program designed for counselors and health education teachers. We also contacted the Jaycee's and asked for their support in this program.

Their community involvement program that year was "for the prevention of drug abuse in the community." We then contacted the University of Utah Continuing Education Division. Through them we developed a class which provided 3 hours of credit. After using this approach, we were supported by the school district, and they even paid the registration fee for 50 teachers. This was the first comprehensive drug education program that had been sponsored in our school district. It was so well received that we were asked to present this training for two other school districts in the State of Utah.

After this successful endeavor, I was asked by the State division of drug and alcohol to assist in conducting workshops throughout the State of Utah. As some of you may be aware, when one leaves the Wasatch Front area, which includes major cities of Ogden, Provo, and Salt Lake City, the State of Utah is very rural. As I traveled across the State, I observed the communities seem to go through stages. As crisis situations develop, the community seems to follow a particular pattern: one can observe the signs of apathy, growing concern, direct confrontation, alarm, shock, and panic. The community reaches first for a quick and simple solution. Later a treatment focus, then a prevention focus, and finally the community model approach.

As I look back on the training that I had received in San Antonio, I remembered how we had learned to build a community. Recalling this experience, I realized the only way you can solve your problems successfully is in your community.

A lot of the training that I am presently doing is with police officers and persons from the criminal justice system. One of the first questions I am usually asked when talking to officers about drug and alcohol prevention education is: "Am I to be a police officer or a social worker?" In days past, the worst thing you could call a police officer was a social worker, but the police mission of today calls for: one, the prevention of criminality; two, the repression of crime; three, apprehension of offenders; four, recovery of property; and five, regulation of noncriminal conduct.

In order to work successfully in a community an officer must look at the prevention of criminality as No. 1. One of the primary areas of

the primary areas of concern is the abuse of drugs and alcohol. It is my strong belief that a police officer must receive extensive training in human relations skills to work with people effectively. This is especially true of substance abuse, and when one looks closely at the drug and alcohol problem, it is usually found to be a "people problem" and not a "chemical problem."

We are often asked, "How can you measure prevention programs successfully?" In response, I have to stop and think of many incidents like the 19-year-old boy that I saw last month, who held a fully loaded and cocked .22 caliber pistol to his head and threatened to kill himself. After a full 28 minutes of talking, this boy finally put the gun down. It took another hour to convince him treatment could help. I wonder what would have happened or what might have been the outcome, if I had not had the training to deal with such "people problems" in a sensitive and critical situation.

One of the most successful communication and interpersonal relation skills which I acquired through training is called the Narciso model. My first exposure to this was at San Antonio. Since then I have listened to Dr. Narciso on several occasions and also have read his book. I try to apply these concepts and skills in my everyday life. The model is called "Declare Yourself." It was this approach that I used in the incident with the boy. I feel I was successful in reaching him at a critical point in his life.

In the U.S. Office of Education Training program for region 7, most of the facilitators have at one time gone through as training participants. In 1977, I was asked to return to the training program as a facilitator and to work with four Salt Lake teams that were going through training at that time. It was like a culmination of 5 years of hard work. We were now training school-based teams, reaching the people in the system who have the clout to make changes. We had administrators, teachers, counselors, community people, and students. After training, the teams from Salt Lake returned to that community. They are doing some exciting things. Dr. Ed Parker is the cluster coordinator for the district and has the full support of Superintendent Don Thomas. A cluster is four teams, each consisting of five to seven team members.

About a month ago I had the opportunity of talking with Dr. Thomas at a meeting in which I was introduced as one of the facilitators who had worked with the Salt Lake City teams. At that time he made the statement:

> I don't know what you did to those people back at that training, but I have never seen a group of people return to work so excited and so enthused and ready to make changes to provide and improve a system for effective drug prevention education.

Since then three other comments that Dr. Thomas has made have been called to my attention. Due to time, I will not read those. I leave those for you, but I think it is critical that you read those.

This type of support from a superintendent assures the success of a project. It is extremely critical that these programs should continue.

With the new cluster concept, each team reinforces the other team and as the team expands in their school, those problems that once seemed insurmountable to a small group of people can now be effectively dealt with using the community model approach.

In closing, I would like to read a poem that a 19-year-old boy wrote approximately a month before he committed suicide. It is called "Sometimes Life."

Sometimes life just ain't worth the hassle
It's like using a straw to break down a castle.

Sometimes life is full of bugs
And you wonder why I take my drugs.

Sometimes when I ask for help
You say, eat some health food and smoke some dope.

Sometimes life is so miscried
I wonder if I was born or really died.

Sometimes you say, I am really lying
But deep down inside I am really dying.

What you see ain't no lie
I may seem happy, but I want to die.

This poem was written in the Salt Lake County jail and was found in his room after he had committed suicide. I have to ask, what would have happened if someone in the school system or someone in the community could have helped this boy at an earlier age? Perhaps someone could have given him some different skills to cope with life and some of its problems. That is the only way you can place a value on prevention education, is to place a value on a person's life.

Thank you very much for the honor of testifying before this subcommittee. I urge you very strongly to support this type of program which is working successfully in our community.

Mr. BRADEMAS. Thank you very much, Mr. Harman. Indeed, gentlemen, thank all of you for, I think, extremely illuminating and valuable testimony. There are many questions I could put to you, but I will make a general conclusion.

You have all endorsed the program, and given from your own experience examples of the effectiveness of the program. To what extent have you carried on your programs with funds under this statute or, let us say, with Federal funds, and to what extent do you get either State or local tax dollars to help you mount drug and alcohol abuse education programs? Maybe each of you could briefly respond to that question.

Mr. HARMAN. I would like to begin. Exact percentagewise, I could not tell you, but what happens in the State of Utah is, the team comes back to you. Don wants to present a program. We work with the State Division of Drug and Alcohol. We generate funds there. We work with the board of education. We generate funds there. We work with the board of education. We generate funds locally in the community, and we design a program.

I am chairman of the board of the Community Drug Crisis Center, which is funded by the United Way, city, county, and State funds. We initiated a program in the West High School called the peer council program. This program is completely funded independent of the school district, and yet it is a part of their action plan that was designed in the training program at Trinity University.

The exact percentages I don't know, but we reach for any area of funds we can get.

Mr. HELM. Within our district cluster of four schools, the only thing that the Federal Government has paid for has been the training of our teachers. That was the 10-day process conducted from October 2 to

October 11, 1977. Everything else in terms of time, our teachers meet after school, before school, and on weekends, and it has been their own time.

The community agencies indigenous to our community have met on outside times to help us dig up some of these things. Even in the poorest of the communities, it is entirely possible to come up with funds. We are in the process of training peer group counselors, kids to help kids. In order to pay for their trip, their retreat, so to speak, their going out of the city of Chicago for training in this area, they have given dances to raise money on their own. They have sold candy, and engaged in other fundraising activities to do so.

Our entire program depends upon how well those high school kids function, to get back into the elementary schools for their peer group program.

My last comment on that funding business is, everyone here is different, and we are, of course, no exception. I have been told that juts outside Chicago there is a place called Illinois, which is first in the country in terms of the production of corn. I would like some of that corn money to help my kids. Thank you, sir.

Mr. ESTES. We get less than half our money from outside sources. There is over $300,000 a year in our program. About $140,000 is from the State, about a dollar a pupil, and from the resource center or training center we get $5,000 to $7,000, or at least have in the past for purposes of training. Our big focus now is on family training efforts. In fact, we are going to put $10,000 into a family training model at the end of the school year, but we desperately need the seed money to help us move ahead in this area.

Mr. KAZEN. As a regional training center, most of the money we have to operate on comes from a contract of the Office of Education, so from that point of view it is 100 percent. What we try to do is show the team members and the participants how to raise money on their own when they get back.

This program has been successful to the extent that schools are willing to pay their own way to training, and I have got to find a way to expand the limited amount of moneys we have for staff to staff them once they get there. In the last training we conducted, two school districts paid their own way to the training because there was not enough money in the grant to get them there.

Mr. BRADEMAS. Gentlemen, thank you all very much indeed. To reiterate, you have been most helpful with your statements. Oh, I beg your pardon. I want to recognize Mr. Biaggi. Forgive me. He is hiding way over there on the other side. We may call him as a witness, because he has had a great deal of experience as a law enforcement officer in the largest city in the country in this area, and I suppose is as knowledgeable as any Member of Congress about the problems we have been discussing. Mr. Biaggi?

Mr. BIAGGI. You are generous, Mr. Chairman. I am closer to the fount. That is why I sit here.

[General laughter.]

Mr. BIAGGI. I gather from your testimony, and I would like a brief response to it, an affirmation or denial, that apparently what we have been doing is not sufficiently effective.

Mr. ESTES. I think we are saying the opposite.

Mr. BIAGGI. I am not talking about what you are doing, what you have testified today. I am talking about what Government has been doing heretofore, exclusive of your testimony.

Mr. ESTES. I would say generally what the Government has been doing is too little too late.

Mr. BIAGGI. That is a very diplomatic answer.

Mr. HELM. Sir; did you want a response to that from me?

Mr. BIAGGI. Sure.

Mr. HELM. I would not only say too little too late. I would say behind and not up with. I guess I do differ in terms of the fact that I am on the front line walking the halls in the high school, and involved with the students. I find that this program is a successful program, and I find that it is interesting that since I have been in Washington, very few people seem to know anything about it, and that is my comment.

I would not only say too little too late, but I would say funded but not up by.

Mr. BIAGGI. I have heard of your work, Mr. Estes, in the most laudatory terms, and I agree that Government and bureaucracy has a way of going around and around, as you say, to rediscover the wheel. Mr. Chairman, it would appear to me that there should be an independent assessment of Mr. Estes' work.

I know you make reference, Mr. Kazen, to the National Data Bank. I presume that you provide the National Data Bank with your statistics.

Mr. KAZEN. We get the statistics from the schools.

Mr. BIAGGI. It confirms my original request, Mr. Chairman. An independent assessment, I think, would be in order as expeditiously as possible. My information with relation to the work being done by Mr. Estes has been that it probably will be one of the more beneficial things that we in the Congress could do.

Mr. Helm, how were you related to Mr. Estes' program?

Mr. HELM. Not at all. In a very distant sense. We are inspired by the U.S. Office of Education. I am a minor leaguer. Dr. Estes is a major leaguer.

Mr. BIAGGI. Aren't you both doing the same thing?

Mr. HELM. I have a cluster of four schools which only started the program in October, and he has a great deal more experience with an entire school system, so the relationship is one of friendship at this point.

Mr. BIAGGI. Mr. Helm makes reference to an alternative, Mr. Estes, which seems logical. How does that fit into your program?

Mr. ESTES. That is exactly what we are about also. He has four teams. We have 42 teams. In addition to that, we have a management information system, a data bank that probably has more data than any major school district in the Nation. We have an R. & E. staff which has been systematically evaluating this now for 7 years. We do an inventory each year. So, I think you are right. We do have a great deal of information. It might solve some of the problems you [indicating Mr. Helm] are talking about of disseminating information so we don't continue to rediscover the wheel.

Mr. BIAGGI. I just testified in another subcommittee with regard to crime and vandalism in schools. How does your program relate to that goal?

Mr. ESTES. It has reduced through our community action centers daytime crime, for example, more than 50 percent, third party suspensions down 40 percent. I think this kind of preventive program can show significant improvement in a problem that parents relate as one of the top problems.

Mr. BIAGGI. Mr. Chairman, you might like to know I anticipated that response, because I had the information in advance, although Mr. Estes did not know that, but for the record, this program—and that is why I posed the question—this program has more than a single objective. It could provide the answer to many questions.

Mr. KAZEN. I think there is one last question.

Mr. BRADEMAS. If the gentleman from New York would be kind enough to yield, I must go to another meeting, and I would be grateful if Mr. Biaggi would be kind enough to take the chair and allow me to say that I have the testimony of the other witnesses, which is very good testimony as well, and I want to express my appreciation to all of the witnesses for having come today, and I would ask Mr. Biaggi to take the chair.

Mr. BIAGGI [presiding]. OK. One last question. You make reference to the success you have had in New York, Mr. Kazen.

Mr. KAZEN. Not in New York. There is a regional training center in New York, but I do not personnally work there. That is headed by Gerald Edwards. I was referring to the locations of the five regional training centers. One is in Chicago, which we are hearing testimony about. I head the one in San Antonio, Tex. It is a system with five centers.

Mr. BIAGGI. Do you have any knowledge of the efficacy of the training center in New York?

Mr. KAZEN. I know about its workings. I do not know about its daily workings. I think probably Dr. Nowlis could give you more specifics about it.

Mr. BIAGGI. The last page of your testimony, "I think the job has been done well in the past 7 years in New York, Chicago, Miami, California, and Texas." Let me tell you why I raise the question. Until the notion was introduced to me not too long ago, I was not even aware that we had one.

Mr. KAZEN. It is one of the Government's best kept secrets, sir. [General laughter.]

Mr. KAZEN. That these training centers can operate and do the jobs that they do, there are school districts in this country that think this is the most forward program the Federal Government has ever come up with, and nobody knows about it. It saves money. It is cost effective. It saves lives, and no one knows that it is there. It is a great tragedy, and I would hope that that can be corrected, because it should be.

Mr. BIAGGI. Who is in charge of the regional training center in New York?

Mr. KAZEN. Dr. Gerald Edwards.

Mr. BIAGGI. I would appreciate it if you could arrange for me to get in touch with him.

Mr. KAZEN. I would pass that on.

Mr. BIAGGI. It might be a revelation. Thank you very much.

Mr. KAZEN. Thank you.

Mr. ESTES. Thank you.

Mr. HARMAN. Thank you.

Mr. HELM. Thank you.

Mr. BIAGGI. The next witness is Lester Przewlocki, the dean of the School of Education, Boston College, Chestnut Hill, Mass. and Lisa Sombart, teacher at Parkade Elementary School, Columbia, Mo.

STATEMENT OF LESTER E. PRZEWLOCKI, DEAN, SCHOOL OF EDUCATION, BOSTON COLLEGE, CHESTNUT HILL, MASS., AND LISA SOMBART, TEACHER, PARKADE ELEMENTARY SCHOOL, COLUMBIA, MO.

Mr. PRZEWLOCKI. Thank you, Mr. Biaggi.

Mr. BIAGGI. Do you have a prepared statement?

Mr. PRZEWLOCKI. Yes. It has been submitted, but I will summarize my prepared statement.

Mr. BIAGGI. Thank you.

Mr. PRZEWLOCKI. Boston College is essentially one of the oldest Jesuit institutions in the United States, founded in 1863. The School of Education, of which I am dean, was founded some 25 years ago, and I think it is very safe to say as an overview that we had a rather safe, rather secure, rather traditional curriculum for preparation of teachers, and it is not to be critical. That is the very nature of the institution which I represent. So, when we were approached some 2 or 3 years ago by Father Surette of the Life Resources Agency in Boston, which is an agency of the Archdiocese of Boston—he, for lack of a better term, might be called a street priest, working with troubled youths, alcohol, drugs, and so forth—at any rate, he and I talked about the possibility of getting together to be one of the demonstration sites under this particular program, and I must confess that I was somewhat skeptical at the time. I think some of our faculty was skeptical, because I think we were all channeled into the traditional view about drug abuse, and that is that you have to look at its deleterious effects rather than its causes.

We had courses, of course, which demonstrated drug abuse and the harmful effects of drug abuse, and what Father Surette was explaining in a sense as we went through our program is that what we ought to do in teacher education is take one step beyond that, and that is to look at some of the root causes of alcohol and drug abuse, alienation, fear of failure, insecurity, lack of self-esteem, and all of those other things that previous witnesses had talked about.

So, fundamental to our project was to say, well, indeed, if we are going to get at root causes of insecurity, alienation, teachers would be on the frontline. Then they must be able to provide some kind of, environment to not only understand but also cope with these particular problems. So, in kind of a rosy picture kind of view, we look at our program something like this equation. We say, if we can change prospective teachers, then indeed they must go into their respective schools and cause change. If teachers and schools change, and have understandings, then there ought to be a change in students.

Then, the final outcome might be a reduction in alcohol and drug abuse.

As we looked at our project, we saw that indeed it was long term and perhaps even more difficult would be ways to evaluate and measure what we are trying to do, because change takes time, and we

needed followup services, and we had to follow the students as they proceeded through their various lifestyles.

Nevertheless, we saw that we could indeed have a very unique way of coming to grips with a social problem as well as to bring new vitality and viability to our own teacher education programs.

There is no need to tell you that schools of education today are decreasing in number and applications and, indeed, faculty and resources. So, together—and by together, I mean our staff of Boston College and the life resource people—we got together to determine some of the objectives we would want to accomplish and some of the goals we would want to accomplish in our program, and I will just quickly go over some of them.

First of all, we wanted to develop a new and creative approach to preservice drug education, which would include not only traditional curriculum and methodology and field experience. We have those in our safe, secure programs now, as I characterized them. Indeed, we wanted to interject a new concept of the whole effective domain, the feeling part of how teachers can cope with children who are having problems, to develop strategies, indeed, for them when they do get out into the classroom.

Another objective was to utilize available resources for a program that indeed would enhance our project objectives, because we would have the opportunity to cooperate and coordinate with other agencies not really available in our traditional teacher education program.

For example, we have one of our training sites or field sites called the Alpha-Omega. It is a residential home for 16 adolescent boys, 14 to 19 years old, 50 miles west of Boston. These are youngsters who have been adjudicated in the courts for various problems at home and in school, and they are put into this residential setting for 9 to 12 months, where they receive counseling, schooling, peer evaluation, and so on, and we have our students out there now.

Another community is Gloucester, located north of Boston, a very chronically depressed community where the disadvantaged Portuguese and Italian people who do not even speak English send their children to school. Eighty percent of those students choose not to go into college. Seventy-five percent of them, by their own admission, have been involved in alcohol and drugs.

So, there are some alternative high schools in Gloucester which attempt to meet the needs of their alienated kids who do not go to traditional school.

Mr. BIAGGI. Just a moment. You made reference to this last district, in Gloucester, where they do not speak English or have difficulty. Do you have bilingual programs in those schools?

Mr. PRZEWLOCKI. Yes; they do have programs, but still the basic Italian population, the mothers and fathers, is the population I am talking about. There are bilingual programs for the students. They do speak English.

Mr. BIAGGI. Thank you.

Mr. PRZEWLOCKI. We have another site in the heart of the inner city of Boston. It is a Catholic school, St. Francis de Sales Community School. It is 100 percent black, staffed mainly by black nuns. We have our students there also.

Another community is Somerville, located on the fringe of Boston, white, lower class, blue collar, not very high expectations for edu-

cation. We have alternative programs there, and we have our students in those programs. We also wanted our students to have some idea at least of the harmful effects of drugs, so we have incorporated that into some of our seminar settings, not really focusing on any one particular drug, but more examining some of the reasons why kids get into drugs, and we have meetings at which our undergraduates learn how to talk to kids who have been on hard drugs.

So, our students get that feedback, get that experience, get some sense of what is happening to a youngster who is really having these types of problems, fear of alienation and so on. We wanted our students also as another objective to understand their own values and behavior, because our theory was, if one of our students didn't really understand himself, he could hardly understand those who are having very serious problems.

We had a number of programs within the curriculum at Boston College in which students were able to express and share their values and examine them and be challenged, and indeed, not only were they challenged, but they challenged us, the faculty and the administration, about some of our own assumptions about behavior.

Another objective was to provide them skills for intelligent decision-makin and open communications, and we did this again through seminar settings, which were held biweekly, noncredit, if you will, for our students, and the seminars were structured not only to be simply academic experiences, but really they were spent in identifying, developing, practicing skills and developing strategies so that our preservice teachers would be able to cope with those problems they saw in these various alternative sites.

My prepared statement lists a number of other activities which I will not mention now. There are several other objectives, and again, for the record, I think they center fairly closely around the things I have spoken of earlier.

Well, how did we start? We started with a class of about 25. Our enrollment in the School of Education hovers around 1,000 from freshman through senior year, but we took this as an experimental program. We began with 25 sophomores, and their program consisted of, of course, the traditional liberal arts, the teaching methodologies that were already within our programs for elementary and secondary teachers but the substantial difference was the field placement, where these students went.

In other programs, in traditional programs, our students may go into suburban schools, or perhaps to a lesser extent to the inner-city schools. Mainly, our students are upper middle class, and for the most part really do not want the hassles associated with inner city schools. I do not say that critically, either. It is just a fact of life.

Mr. BIAGGI. I should give you an indication we have little time left.

Mr. PRZEWLOCKI. We had student evaluations and feedbacks. We had seminar settings. We had them develop logs. and that is fine, and we gave them questionnaires, and they thought ours was a very hot-shot program, but in a sense that is very subjective. It is important to us, and we were happy that they were happy, but yet the true test, we think, is yet to come—how they translate what they learn through the life resources at Boston College program into their present positions.

All of those graduates did get positions.

We think that the projects had an impact. We really think it has had an impact. We are going to sponsor some followup studies to our graduates to really see what kind of an impact is happening, but those might be long range. Short range is one. Some other impacts are that some of the other elements we have discussed in the life resources program have been incorporated into another project which we have in parallel at the same time, called the dean's project, which was funded by the Bureau of the Handicapped.

We have taken a number of the things we learned from drug resources and put them right into this revised curriculum. Students were provided with opportunities to see a wide variety of cultural settings, from the depressed communities to residential settings to the all black school. They worked with community agencies. Undergraduates were challenged to use skills and techniques and the understandings and knowledges in settings quite unlike their fellow classmates had, but I think the most important thing for us at Boston College, we did learn a very valuable lesson through this collaborative effort, and I might indicate, Mr. Chairman, that out of the six demonstration projects, we were the only one which was not totally university-based. We associated ourselves with this other social agency, but the lesson was this, that outside agencies, such as life resources in this case, can and should provide a very articulate voice in preparing teachers for another kind of real world.

Teacher education in the past, I think, has pretty much listened to its own drum, but I think there are some other beats out there that we must now listen to.

Thank you.

[Information submitted by Mr. Przewlocki follows:]

BOSTON COLLEGE/LIFE RESOURCES PRE-SERVICE TEACHER TRAINING MODEL
Alcohol and Drug Abuse Education Program
U.S. Office of Education

When the Boston College School of Education was approached by Rev. Melvin Surette of Life Resources, an Agency of the Archdiocese of Boston, to participate in a Pre-Service Teacher Training Program in Alcohol and Drug Abuse, all of us connected with Boston College were skeptical. Our skepticism was based on the undergirding principle of the Office of Education that intervention in the lives of students by teachers could lessen drug and alcohol usage by young people. Most, if not all of our faculty, had been channeled by previous experiences to think that the way to get at the drug problem was to show its harmful and deleterious effects on society. That meant programs in drug recognition and symptoms of drug usage; that meant we were more interested in effects than causes.

The experimental program was, as Father Surette explained it, an approach which examined the root causes of drug and alcohol abuse: alienation, fear of failure, insecurity a lack of self-esteem, anomie. Fundamental to our project was to humanize pre-service teacher education so that those teachers would, indeed, create a humanistic environment for their students. The equation would look something like this: Change in teachers → change in schools → change in students → reduction in drug abuse. It seemed to us that the project was long-term and the results of it would be difficult to measure or evaluate. Nevertheless, we saw unique ways to come to grips with a gnawing social problem as well as to bring new viability to programs in teacher education.

Together with the Life Resources' staff, the faculty of the School of Education determined objectives in developing affective skills and alternative educational strategies to be demonstrated by individual participants in a

humanistic approach to drug education.

1. To develop a new and creative approach to preservice drug education programs

When communities realize the schools are an effective place to deal with the problems of substance abuse and other dysfunctional behavior, they will demand more of teachers in the classroom. The university, in turn, must recognize its responsibility to address the problem in its teacher education programs. Traditional curriculum, methodology, and field experience have not responded to these additional needs. Humanistic or affective educational techniques and programs that take into account the personal needs of young people and provide opportunities for personal growth and life-skills development can be effective prevention strategies. It becomes clear, then, that the university must incorporate these concepts into both academic and experiential preservice programs in order to unify the entire teacher education effort. It was from such a theoretical base that Life Resources and the Boston College School of Education developed a preservice model incorporating humanistic or affective educational concerns through a mechanism of alternative field placements and complementary academic programs.

2. To maximize the effects of available resources in meeting individual project objectives by enhancing cooperation and coordination between the participating teacher education institution, Boston College; an outside agency, Life Resources; and other cooperating field sites

A variety of resources were brought together to achieve project goals: Boston College School of Education, Life Resources, and several agencies, including preschool programs, traditional schools, alternative education settings for junior and senior high school students, residential group settings, and drug treatment programs. Rev. C. Melvin Surette and James E. O'Connell, Jr., the Project Director and Assistant Director respectively, had contacts with personnel in many treatment programs and community service agencies, as well as with persons in metropolitan area community education-prevention efforts. These contacts facilitated the inclusion of the agencies in the various options offered undergraduates interested in obtaining a clearer understanding of behavior problems and the role of educators in the prevention process.

Before the inception of the preservice project, a system of core learning centers, using six public school systems, provided field placement opportunities for most of the undergraduate education majors at the College. These placements began in the student's sophomore year on a one day per week basis, continued through the junior year, and became 15-week practice teaching settings for the senior year. Some students sought and received placements in private settings, some in the Museum School, and others out of state or abroad in England. In this traditional placement system, the College supervisors for undergraduates were usually taken from the pool of graduate students at the School of Education.

It was consistent with the goals and objectives of teacher training at Boston College that in addition to conventional or traditional training sites, it sought placement opportunities for those seeking teaching-related careers in non-public school settings.

Several parochial, public, private, and alternative schools in or near Boston were incorporated into the project's alternative program because they were responsive to the objectives. Because the nature of the alternative placements varied from site to site, those which were most representative are described below.

*Alpha Omega in Littleton, Mass., is a residential, therapeutic home for 16 adolescent boys, 14-19 years of age, who are experiencing difficulties at home and at school. All are court adjudicated to the home and live there from nine months to a year. Most receive help through individual counseling and/or group and family-group therapy to develop a fuller awareness of themselves, to gain the skills necessary to improve their self-image and their ability to cope with reality, and to accept responsibility for behavior toward themselves and society.

*Gloucester is a chronically depressed community of nearly 20,000. Unemployment hovers at 15 percent and is particularly heavy among the "disadvantaged" Portuguese and Italian populace whose native language is not English. In the high school, almost 80 percent of the students choose not to go on to college; and, by their own estimates, 75 percent have used drugs other than alcohol. Three sites are located in this North Shore community.

Gloucester's Project Nuva staff supervises the alternative high school and preschool programs. The alternative school provides an educational system for young adults, 14-21 years old, who are looking for a style of living/learning which emphasizes personal growth, recognizes individual abilities, encourages self-determination, supports creative inquiry, and trains and reinforces basic skills. The meaningful opportunities for students with these special needs are provided through situations, curriculum, tutoring, and guidance which enable the student to develop valuable skills in journal writing; group and individual exploration in reading, language, and communication; vocational and career development; and group and independent studies in literature, mathematics, history, science, physical education, human sexuality, and health. Personal and academic growth are stressed equally.

The Life Resources and Nuva staffs proposed that a preschool be established as a part of the alternative program. Student volunteers demonstrated their ability to build a program by working with community agencies, conducting a needs survey, and researching appropriate licensing requirements. In addition, they satisfied their own field placement needs and gained valuable experience by working in a local Head Start program. After curriculum development and parent orientation meetings, the preschool opened in Gloucester during the spring 1977 semester, with a staff of seven undergraduates and a supervisor/teacher.

*St. Francis de Sales Community School is a member of the Boston Archdiocesan system. Located in the inner city, the school serves and is administered by a predominantly black population. Educational objectives include the encouragement of verbal expression and feelings; deemphasis on competition; involvement of parents; and growth in the ability of staff members to work cooperatively and creatively while encouraging individual thinking and self-reliance in all the students. These objectives enable the student to feel confident and to support and trust other students.

*Somerville is a white, lower middle-class, blue-collar community which supports an active youth program. The Pilot and Full Circle Alternative Schools offer integrated educational and counseling programs to junior high and senior high school youths unable to cope in the traditional system. Emphasis is on developing the skills necessary for responsible decision making and personal growth. The Somerville Human Development Program offers informal peer counseling and minicourses on subjects of interest and concern at the high school. The staff also provides inservice training and consultation to the faculty and to this project.

These agencies/sites all were new resources and provided Boston College administrators and faculty assistance in answering their own students' needs. Educational, counseling, psychological, and social work staffs at the sites enhanced the cooperative learning environment.

3. To provide project participants with broad, general knowledge about substances, and perceptions as to the complex causes of abuse

Because the administrators, faculty members, and undergraduates do not have pharmaceutical knowledge, the project staff experimented with different ways to inform participants about substance use and abuse. There were discussions of the principal drugs used and abused by youths with whose lives and lifestyles they would come into contact at field sites. A seminar session was offered each year to deal specifically with this information, and printed materials were made available. The staff identified the range of substances open to abuse without focusing on one particular drug.

While working in alternative education settings, most undergraduates had to confront substance use that interfered with the lives of their students and brought them into such programs. At center meetings, undergraduates learned how residents and staff together developed and enforced self-imposed regulations about substance use. This proximity to problems helped the undergraduates examine their preconceived notions and decisions about drugs: their choices, their biases, or their own use. Undergraduates came to understand some reasons adolescents choose to use these substances.

4. To develop in project participants the capacity to understand their own values and behaviors as well as to respect the values of others

Realization of this objective came not so much through cognitive planning and educational schemes as through interactions among the participants. As undergraduates sought to understand and appreciate values, behaviors, and attitudes different from their own largely middle-class awarenesses, and to deal with these as merely different rather than threatening, they made significant gains in teaching-learning. They began to consider how differences came to be, how these differences affected life and learning, and how their own roles as teachers came into play.

The undergraduates brought insights gained through their teaching roles to their roles as students at Boston College. The realization that they needed to respect their students' values caused them to seek within the College environment the same kind of respect for their own values. Individual needs were recognized and opportunities to alter curriculum were made.

The impact of this recognition came full-circle when the faculty and administrators at Boston College began reassessing the School of Education curriculum. Not only were the written communications and person-to-person discussions evidence that some attitude changes had occurred, but behaviors indicated that a mutual respect had begun to emerge. Students more willingly accepted the College as an educational entity, and the College sought ways to change and expand because of this affective, alternative education experiment.

5. To develop in project participants the skills to work with young people in the development of a positive self-concept, a workable values system, skills for intelligent decision making, skills for open communication, and other skills thought to relate to a reduction of drug abuse

The project sought to provide the theory and experiences necessary for participants to develop an understanding of interpersonal relationships, the group dynamics in a classroom, teaching/learning roles, and affective life skills. It was more than an academic program reviewing current social, psychological, and political knowledge in the area of innovative, humanistic education, and more too than an isolated set of alternative field placements. The two were integrated in biweekly seminars.

Seminars. The seminar sessions--twice monthly, noncredit meetings led by the project staff--were intended to complement field experiences with academic input about the essential knowledge, skills, and attitudes to be attained. In these sessions faculty, site staff, and undergraduates were encouraged to explore a broad range of information and issues. Discussions focused on the substance abuse issue--its history, institutional response to the problem, its contemporary cultural/social context, and educational strategies to deal with causal factors--as well as on generic educational innovations, such as the Magic Circle, Schools Without Failures, Role Playing,

Values Clarification, and Peer Counseling. The undergraduates were encouraged to relate the discussions to their personal and on-site growth processes.

The seminars were not structured to be simply academic experiences. A significant portion of each session was spent in identifying, developing, and practicing skills and strategies related to field experiences.

Site staff members occasionally conducted seminar sessions at Boston College to share their educational experiences and philosophies and to relate these to project goals.

Activities at Sites. The alternative field placements offered the major opportunities for experiential learning. The seminars outlined basic concepts, stimulated thought, suggested strategies, and motivated action; then, participants experimented with suggested strategies and activities in the field. Undergraduates worked closely with young people in such projects as determining the pollution level in a pond behind a residential group home, plastering the walls of a resource center, and leading a Black History lesson at an inner-city school. Journals and logs reflect that undergraduates became more aware of themselves, their value systems, and their history, and were motivated and more able to bring that understanding of self and others to the learning environment.

Fear, anger, frustration, and boredom were issues to be dealt with. An evaluation mechanism was devised from these identified areas and the personal, affective concerns of undergraduates taken into account. The undergraduates exhibited a high level of self-direction and responsibility for what were essentially their own field experiences. Evaluation was perceived as a supportive, nonjudgmental process which would describe and enhance growth rather than identify and criticize shortcomings.

The field placements themselves were intense, realistic, and often initially intimidating experiences where "survival" was very much a concern. Many undergraduates held stereotypic views of juvenile delinquents, drug addicts, and their inner-city and ghetto environments. Such perceptions, readily communicated in the classroom, often interfered with learning. To effect a solution to the real or imagined problems of survival, a supportive advisory and supervisory system was developed.

Through experience, participants learned to recognize and solve problems, and were constantly reflecting on and making decisions about their placements, their participation, and their career choices. Site students were simultaneously encouraged to deal with the problem situations in their lives and make responsible decisions about choice, behavior, and future goals. In one setting, minicourses were established on issues of concern: human sexuality, weight control, alcoholism, and sexual stereotyping. A another site, undergraduates led students through role playing about truancy, vandalism, and exam taking. Through this contact, project participants learned to communicate openly and honestly with young people.

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6. To combat anomie by developing in project participants an understanding of how group pride, associated with ethnic or community roots, can influence the learning environment

The project field sites often reflected strong group and cultural identification. Group pride was an important issue in one largely minority-populated school where the message to students is "we are good within and for ourselves." Cultural and group pride was demonstrated in other placements as well--drug programs, residential homes, and alternative schools--where the education program was built around special needs of site students. Boston College undergraduates came to appreciate how a direct response to special needs can combat boredom and alienation. Some undergraduates experienced a clearer sense of their own identity and learned of their ability to influence the educational program at Boston College.

7. To provide participants with the opportunity to explore alternative education concepts and to work with others to practice and develop life skills that challenge dysfunctional behavior

Several factors seemed particulary important in creating an environment--specifically a teaching/learning environment--which encouraged alternatives to substance abuse and other destructive behaviors. Five of these were considered:

1. Challenge. Because the focus of the project was on affective growth of participants and site students, little has been said about the standards of academic accomplishment. This omission should not be taken to mean that cognitive achievement should be minimized; indeed, high academic expectations and a high degree of challenge have had a positive effect on students. An important part of this challenge, whether the task be shingling a roof, solving a math problem, or presenting a role-play situation, is its relevance to the student's world. For example, when site students in Gloucester restored a colonial burial ground they learned a great deal about their community and their own ancestors. They helped draft legislation which affected their efforts in Gloucester and solved math problems necessary to construct a building.

2. Freedom. Personal and professional growth needs an environment where freedom of choice exists. A student needs an opportunity to make meaningful choices in order to grow. In the inner-city elementary school, the student or teacher raised value issues through discussions of pride, cooperation, or unity. When the people sharing the classroom environment had a chance to affect their own development, they learned to trust and respect each other's decisions.

3. Respect. The worth and dignity of students were vital. An essential element of alternative education was given recognition in the individual student's right to responsible decision making, whether in a classroom or in a residential group home. Stereotypes of "juvenile delinquents" were broken down when undergraduates recognized, "I would have dismissed these guys as bad, stupid . . .just plain trouble. Now I know they are not . . . . Sometimes they teach me."

4. Control. Theoreticians suggest that children who grow up in a permissive environment tend to develop less self-esteem than those reared in a firmer, more demanding atmosphere. Often, a direct association between alternative and permissive is assumed; but many alternative programs express caring through commitment to discipline, order, and growth. Structured and demanding programs clearly define responsibility and encourage growth.

5. Success. Perhaps the single most important step that teachers can take is to provide an educational atmosphere of success rather than failure. Youngsters need to feel good about what they cannot do. While students learn to accept their mistakes and not be embarrassed, they grow through their accomplishments.

Students were informed about the new program--indeed they were recruited--and a cadre of 25 began the program. Basically it consisted of the traditional liberal arts/professional education core but the field placement for observation and teaching was in one of the participating schools or agencies identified above. In addition, the Life resources staff provided bi-weekly follow-up seminars in which students could share experiences, raise questions, pose solutions. This format was followed for the entirety of the project.

Student evaluations and feedbacks were recorded regularly in their logs, and cooperating Boston College faculty made frequent visits to sites, Deans, faculty and Life Resources staff met regularly to assess progress or its lack of. It was clear from student responses that they were extremely satisfied with the kind and quality of education provided by the Boston College/Life Resources

collaborative. But satisfaction is only one measure of program evaluation: the true test is yet to come, as students translate their pre-service experiences into their present positions. We are sponsoring a two day seminar in April for the first group of students who graduated from the Life Resources project to receive input from them regarding the training they received at Boston College. We believe that the impact of the project, if we have been successful in accomplishing our goals, will be continuous and long-lasting.

However, there have been immediate and short-range impacts to the School of Education through its participation in the program:

1. Many of the elements of humanistic education have been incorporated into the Integrated Curriculum Program - a program designed to integrate special education skills and knowledge into the preparatory program for elementary teachers. Indeed, in the freshman year, all students are required to enroll in a course entitled "Interpersonal Communication in the Classroom," which basically focuses on the students themselves and on children and adolescent behavior, including drug abuse. Each student visits teaching and teaching related agencies which extend his perspective of education. The Professor responsible for the development of this course was an integral member of the collaborative.

2. Students involved with this project were provided with opportunities to see and to work in a wide range of cultural settings and in a variety of formal and alternative schools. They were able to work with community groups and organizations as those agencies sought to establish an educational process which would attract not alienate youngsters.

3. Undergraduates were challenged to use the skills and techniques, understanding and knowledge, in settings quite unlike those in which their fellow classmates were. In turn, they were able in a unique way to challenge implicit or explicit assumptions about child and adolescent behavior.

4. Boston College learned a valuable lesson through this collaborative effort and it was this: that outside agencies (such as Life Resources) can and should provide an articulate voice in preparing teachers for another "real world." Teacher education, in the past, has listened to its own drummer but, especially now, needs to listen to other beats.

Mr. BIAGGI. I have just one question. You said your students are not inclined to go into the ghetto areas or the depressed areas, as you put it. Then who is going to do it?

Mr. PRZEWLOCKI. That is a problem, Mr. Chairman. It is true.

Mr. BIAGGI. It is a major area of concern.

Mr. PRZEWLOCKI. We do, however, have opportunities to work with the Boston schools, and indeed we do, and I do not want to characterize that statement as saying, all of our students refuse to do that. That is not quite true, but looking at the background of our students, very high, upper class, they are not too much inclined these days to go into an inner city school.

Mr. PRESSLER. If I might interject a question, Mr. Chairman, I note that you talk about Somerville as a white lower middle-class community. I am somewhat familiar with Somerville. I know that there are not racial minorities there, but it is a low-income area. Is the ability of teachers and workers to go into that area different than for a black area of equally low income?

Mr. PRZEWLOCKI. I would say the ability to go into Somerville would be just as great as the ability to go into, say, the city of Boston. Our students in Somerville were working in the alternative high school and the alternative junior high school, and the alternative high school is an abandoned firehouse in Somerville, and they are really trying to make great strides in developing something that is very important to these kids.

Mr. PRESSLER. Thank you.

Mr. BIAGGI. Lisa Sombart?

Ms. SOMBART. Mr. Biaggi, it is indeed a privilege to be able to testify before you today on behalf of a very important program which I hope will be continued. I am Lisa Sombart, a recent graduate of the University of Missouri and a first grade teacher in the Columbia public schools in Columbia, Mo.

My sophomore year in college, in the winter of 1975, I was chosen one of 80 students to be a member of a pilot HIP—humanizing, individualizing, and personalizing—program that was established through partial funding of the Drug Division of the U.S. Office of Education and implemented by the University College of Education in the Columbia public schools.

Within HIP, we learned many different things. It is an alternate teacher education program, and is offered in three semester blocks over a 3-year period. During this time, the semesters including the teaching of reading, science, language art, measurement and evaluation, social studies, physical education, literature, music, and art.

In addition to these didactic courses, throughout the semester courses and seminars addressed at media utilization, humanistic and career education, and drug and alcohol abuse education were taught. All participants in the program are volunteers, students, faculty, cooperating schools, and cooperating teachers alike.

If I may add, the cooperating schools and the cooperating teachers have been quite pleased with the program, and the idea, and with the aids working in the public schools. Moreover, students in the program spend one-third of each day, 2 to 3 hours, as aids in the elementary schools, in addition to the regular 8 weeks of student teaching.

So, within HIP, prospective teachers are given opportunities to actually work with children and experience instructional settings. Furthermore, through HIP, I was able to communicate very closely with the other students, with the faculty, and with my pupils within the school system. This faculty, consisting of specialists in their own fields, taught me the way they would some day want me to teach, to teach on an individualized and personalized basis. Often adviser and advisee groups would meet to discuss problems and to make suggestions.

I always felt that I could speak openly and express my opinion on matters concerning the program and problems I may have had in my teaching experience. I feel that this individualized and personalized approach has carried over in my years of aiding in first, second, and third grade, my student teaching, and now in my own first grade class. I tried very hard to personalize and individualize my teaching.

School greatly influences a child's life. If he can find success in school, then this is a great step toward building a good self-concept for the child to carry through in future school work and some day into the business world. If a child feels good about himself, I feel that he is less likely to turn to outside influences, such as drugs or alcohol. Oftentimes, teachers are bound to traditional ways of teaching, as are children to traditional ways of learning, but each child learns differently, I found this to be the case in my teaching experiences.

Sometimes it is nearly impossible to stimulate a child in traditional ways, but if a teacher, through humanizing and individualizing a child's instruction, can stimulate him to learn, I feel that there will be success.

For example, one of my first graders recently had trouble with a certain concept in math. I knew of his interest in cars, so I brought some of my brother's old matchbox racecars and individualized this child's instruction. I gave him something concrete to work with. He immediately became attuned to and began to understand the concept. This was a step in the right direction. He understood and began to enjoy this concept in math.

I feel so fortunate to have been a part of HIP. Through it I have learned the didactics and also have been given a chance to learn about drugs and drug and alcohol prevention, through the seminars and courses that we took. I also learned about career education and about media and its uses, thereby allowing me to fully utilize all the resources available to me, and giving my students success in school and life. I only wish that more prospective teachers could be given an opportunity to take part in such a program, thus allowing them to humanize and individualize and personalize.

As a teacher, I feel we should not only teach children the academics, but should also teach them strength of character, and to feel good about themselves. In the HIP learning community, I always felt one day I would like to teach just a few people many and beautiful things that will help them, when they will one day teach a few people. This was from the HIP learning community, 1977, 1978. Thank you.

Mr. BIAGGI. Thank you, Ms. Sombart.

[Material submitted by Lisa Sombart follows:]

"H.I.P.: An Alternate Teacher Education Program," by Lisa Sombart, Teacher, Columbia Public Schools

I am Lisa Sombart, a recent graduate of the University of Missouri, where I was chosen to be part of the pilot H.I.P. Program, initiated there in 1975.

Through partial funding from the drug division of the United States Office of Education; the University of Missouri College of Education and the Columbia Public Schools implemented the Humanizing, Individualizing and Personalizing Program, in the 1975 winter semester. The program, an alternate for the preparation of elementary school teachers is offered in three semester blocks over a three-year period. Each of the three semesters contains both didactic and field experiences. The three semesters concentrate upon different sets of content.

Semester one includes the teaching of reading, science and language arts, with an emphasis on child growth and development; also organization and management of the classroom. As an integral part of this content concentration, drug abuse education was presented both through special activities and special seminars.

These seminars were addressed to drug abuse prevention and detection and were integrated throughout the three semester blocks along with career education, media utilization and humanistic education.

Semester two emphasizes the history and philosophy of education, measurement and evaluation, the teaching of social studies and physical education. In this semester, both in the teaching of social studies and physical education ways of recognizing the potential user were discussed and methods of prevention were shared among students and faculty.

The content of the last semester includes the teaching of art, music and children's literature. These are areas where children can release many of life's frustrations. Through the use of value clarification techniques, a child can develop a better understanding and acceptance of self, so necessary in any drug prevention program. The fine arts area offers many and varied opportunities for the use of these techniques.

All participants are volunteers. This includes faculty, students, school principals and cooperating teachers. The H.I.P. faculty learning community for the school year 1977-1978 includes; two deans, department chairman, the laboratory school principal, six professors, six associate professors, three assistant professors, one instructor, three graduate teaching assistants, and one IGE consultant. All specialized academic areas required to conduct the program are represented in the Community. The first group of H.I.P. graduates, of which I am one, are teaching this fall.

Futhermore, students in the program spend one third of each day as aides in elementary schools during the first two H.I.P. semesters. In the third semester, student teaching constitutes the field experience. Thus, within this program, a prospective teacher is given the opportunity to actually work with children and experience instructional settings in both the Individually Guided Educational Schools and the traditional school.

There are general goals in H.I.P. which state, in order to develop effective teachers, the learning community will establish and maintain a learning environment which:

1. Will develop students who will possess knowledge, skills and techniques appropriate for individualizing and humanizing education.

2. Will use learning processes that are based on psychologically sound principles.

3. Will foster positive feelings and attitudes toward self and others.

4. Will promote and stimulate self direction and self improvement.

The last two goals, I feel are particularly important. If a teacher is able to foster positive feelings in a child toward himself and others and if that teacher also promotes and stimulates self-direction and improvement, the child will feel success in his educational setting. Often times teachers are bound to traditional ways of teaching, as are children to traditional ways of learning, but each child learns differently. Sometimes it is very difficult, or nearly impossible to stimulate a child in traditional ways, but if the teacher, through humanizing and individualizing a child's instruction can stimulate him to learn, there will be success. For instance, if a child is having difficulty in math and feels frustration, a teacher who is attuned to individualizing, may seek out the child's interests and use that to stimulate his learning.

If a child has success and is happy in his educational environment, than I feel, he will be less likely to turn to drugs and alcohol, than a child who feels left out, frustrated and has a poor self-concept.

H.I.P. gives a chance to learn about drugs and drug and alcohol prevention, about career education, and about media and its uses; thereby, allowing the teacher to more fully utilize all resources in giving student success in school and in life.

The major purpose of the H.I.P. program, thus, is to produce effective, self-confident elementary teachers, who through an individualized field based program will have acquired not only the necessary skills in the didactic areas; but in addition, will have developed special competencies to provide expertise in the key areas of career and drug education. It deals with the problem of sexism, racism, and drugs, by stressing humanization, and career and drug education throughout the program.

In the H.I.P. learning community I always felt, "one day I would like to teach just a few people, many and beautiful things, that will help them when they will one day teach a few people." (H.I.P. learning community -- 1977-78)

Drug Education / Medi Media	H.I.P. Block I (One Semester First Year) Integration of Field Experience and Didactics	Humanistic Education / Career Education	
	H.I.P. Block II (One Semester Second Year) Integration of Field Experience and Didactics		
	H.I.P. Block III (One Semester Third Year) Integration of Field Experience and Didactics		

HOW H.I.P. HAS HELPED ME

Although we live in an impersonal and mechanized world, education is one thing that I feel should remain on a personal basis. I believe that through the H.I.P. Program, prospective teachers and faculty, alike, are able to communicate closely in a very congenial and workable situation. The faculty, consisting of specialists in their field, taught me the way that they wanted me to someday teach, on a personal and individualized basis. Periodically we would meet within our advisee groups, but more important the these scheduled meetings, were the impromptu visits. At all times I felt that if I had a problem or a suggestion, that I could express my opinion. How important this is in a learning situation! If a teacher can communicate with her students, learning can be a joy, and pupils will feel more self satisfaction and success.

Furthermore, H.I.P. has given me confidence as a teacher. Because of the many hours of aid work, my student teaching was most productive,and the classroom and the ways of children were not new experiences, but more, continual learning ones. However, I could have elected to aid outside of the H.I.P. learning community, but I feel, that students outside of this program miss the most important ingrediant - what the three words stand for: Humanizing, Individualizing and Personalizing.

I feel so fortunate to have been a part of this H.I.P. learning situation. I wish that more prospective teachers could be allowed to take part in such a program, for children need the individualized and personalized touch.

School, to a large extent, influences a child's life. If his academic life can be a success, both in his school work and toward building a good self concept, than he will be less likely to turn to outside influences, such as drugs or alcohol.

I hope that I'm the kind of teacher that my students can not only learn reading, writing and arithmetic from , but more importantly , one from which they can learn Humanizing, Individualizing and Personalizing.

Mr. PRESSLER. I guess my question would be that your statement has been very idealistic, and certainly I commend you for it. I guess the the challenge of the last testimony about those areas of communities where we have an extremely difficult time of getting even the most dedicated people to go, that might be true of some of our Indian reservations in my native South Dakota, and there may be some other areas where people feel it is dangerous or unpleasant to be.

I guess the name of the game is, how do we reach those people?

Ms. SOMBART. I might add that in this HIP program, we not only go to schools of middleclass and upperclass children, but within the Columbia Public School System there are schools that have a majority of lowerclass children and I was fortunate enough to aid my first year, my sophomore year, in one of these schools, and this was the beginning of the program. I only wish that I could have gone back to that school after I had been through some of the courses and seminars, becasue it was a completely different type of child that goes to this type of school, and you do have to deal with this child differently.

I feel that now I would be more prepared to help this child in building a good self-concept than I was when I aided at the school at the very beginning of my aiding experience.

Mr. PRZEWLOCKI. May I pick up on that a little bit, since I was the one who mentioned that? This project enabled—it ended with 75 total, or 100 students—to actually get into those communities, to actually get into settings which were quite unlike those from which they came, where they would be able to understand, as some of our kids told us later. They said they were so turned off by kids who were on drugs in residential settings, or in these other settings, they said they had a sense of revulsion when they saw these things being acted out.

However, through the opportunities to work with these kids, to really start dialoging with them, they came to some kinds of understandings of where those kids were coming from in terms of their own values and their own behavior systems.

Many of those who have graduated now from this very small core program have chosen to work in just those kinds of settings, the Somervilles, the St. Francis de Sales, the Gloucesters, the little towns, and so forth.

You say, how can you encourage others to do that? I think it is through the continuation of such kinds of programs as we have started, very small, certainly beyond the experimental stage now, but certainly very small, and to capitalize, and I think what is endemic to most kids and most people, that is, they want to do some kind of social service rather than just strictly teaching, which is a social service, so by providing greater opportunities to work in a much needed area through additional funding, I think that can be accomplished.

It will not be accomplished by all of our kids.

Mr. PRESSLER. Specifically what kinds of greater opportunities, give me some examples, to get someone into Somerville or some of these areas? Give me an example.

Mr. PRZEWLOCKI. By greater opportunities, I was thinking of greater opportunities for placement in other related agencies. These are illustrative of the ones we have used, because we have had a very close tie-in with the Life Resource people. These are, in a sense, their people, if you will, or their sites, and that was how our entree through the college was made.

There are other social agencies in the greater Boston area which are too sponsoring educational programs, a number of agencies, various denominational churches. There are some black communities, and we see this as a potential for not only our own students, but to help those communities wrestle with their own problems, which are really our problems.

Mr. PRESSLER. I have no further questions.

Mr. BIAGGI. Neither does the Chair. Thank you very much for your testimony.

At this point, I ask unanimous consent that the testimony of all of the witnesses today be included in the record as submitted.

Without objection, so ordered. Thank you very much.

Bailey Jackson, William Butynski, president of the Alcohol and Drug Problems Association of North America, Roy H. Forbes, project director, National Assessment of Educational Progress, Education Commission of the States, Denver, Colo.

I think it is unfair, but we will have, I am sure, some constraints on time. We are in session now, and I would appreciate it if you could summarize your statements. Your full statements will be submitted into the record.

Mr. Butynski?

STATEMENT OF WILLIAM BUTYNSKI, PRESIDENT, ALCOHOL AND DRUG PROBLEMS ASSOCIATION OF NORTH AMERICA, WASHINGTON, D.C.; ROY H. FORBES, PROJECT DIRECTOR, NATIONAL ASSESSMENT OF EDUCATIONAL PROGRESS, EDUCATION COMMISSION OF THE STATES, DENVER, COLO.; AND BAILEY JACKSON, ASSISTANT PROFESSOR, SCHOOL OF EDUCATION, UNIVERSITY OF MASSACHUSETTS, AMHERST, MASS.

Mr. BUTYNSKI. Thank you for the opportunity to discuss with you today the merits of reauthorization of the alcohol and drug abuse education program of the Office of Education. As president of the Alcohol and Drug Problems Association of North America, ADPA, I am priviledged to speak on behalf of the more than 200 agencies throughout the Nation, both public and private, profit and nonprofit, and approximately 2,000 professional workers in this field of endeavor who represent the full range of effort and interest in working for the reduction of alcohol and drug related harm.

One of the 15 special interest sections of ADPA is the education section, comprised of teachers and others with interest in the gamut of educational needs about alcohol and other drugs, alcoholism, and drug dependence. ADPA was founded in 1949 by State alcoholism program directors.

For any health or human need problem, public support first for treatment, research, et cetera, for which delivery systems are put in place. This inevitably is followed by recognition of the need, support, and demand for prevention programs by public policymakers. We are now in the era of prevention in the alcohol and drug problems field.

President Carter pointed this out during the 1976 campaign when he said, "* * * we now must expand our vision to include far-sighted and well-conceived programs aimed at the prevention of alcohol and drug misuse. Prevention is a most important factor in the equation

of comprehensive programing, and it deserves major emphasis by all of us."

Other Federal authorities and Congressmen have made similar statements. We certainly hope to see actions in the Congress so that these words may be followed up by adequate appropriations.

We, at least to this day, have not seen that forthcoming. I think this committee and Congressman Brademas have done a tremendous job. I know in past years, working with the administrations, it has been tough keeping this alcohol and drug abuse program going. It has been tremendous.

At the same time, I think we now have a new opportunity within this administration to in fact have the appropriations come closer to the authorizations. To have an authorization of $34 million and an appropriation of only $2 million, it seems to me, is a tragedy, in terms of what can, should, and must be done, and what in fact you can make sure that we do.

In terms of summarizing and looking at the testimony that has been presented here today, and in fact the questions that have been presented, I think there has been a consensus among three items: one, that in fact the programs established under the Alcohol and Drug Abuse Education Act have generally been effective. There seems to be a consensus as I see it among everyone here that the programs have worked with young people, they have been effective in schools, and yet, why can we appropriate only $2 million if in fact we are to make a serious dent in the problem of alcohol and drug abuse? We must have that appropriation come much closer to the $34 million that has been authorized, and we respectfully request on behalf of our constituencies and in fact on behalf of your own to see and make this program more of a reality than it has been. It has done tremendous things with the little money it has, and yet it is obvious that in fact we need at least the $6 million that Dr. Nowlis referred to earlier, that that is not really a maximum. That $6 million reference is a minimum, and it should be an absolute minimum recommended by this committee and in fact appropriated by the Congress.

Second, I fully agree with, in fact, your question, Mr. Biaggi, earlier, in terms of the need for an independent assessment. Possibly the way we can convince this administration within OE that in fact there is a need for greater appropriations in the area is in fact through an independent evaluation, and thus we encourage you to look at this very serious thing, and possibly through a line item or other appropriate expression of intent, that in fact an appropriate evaluation be mandated and developed for this program, so that this committee, the Office of Education, and the Congress and the American public as a whole can see its effect demonstrated.

Finally, in terms of the third point, I think Congressman Jeffords earlier referred to, and I would like to support his comment in terms of the need for this program to be expanded into nonurban, rural areas. In the past, and in fact through the efforts of Congressman Jeffords when he was Attorney General in Vermont, he led that State in alcohol and drug education programing, and in fact had support from a team trained at Adelphi University under this act.

However, over the past year, this act has, through the necessity of small funding, concentrated on clusters in urban areas. In no way do I mean to demean that effort. In fact, I throughly support that effort.

However, I want to reiterate and reemphasize the need for an expansion of that effort into rural areas. Approximately one-third of the States are not now served by this program. It is essential that rural States and rural areas in urban States in fact receive the services generated by this effort.

We strongly encourage you to in fact expand the effort and do whatever you can in encouraging this administration, and through your efforts in, in fact, making the appropriations to see that this act in fact receives the appropriations it so clearly deserves.

Thank you.

[The prepared statement of William Butynski follows:]

Statement of William Butynski, Ph. D., President, Alcohol and Drug Problems Association of North America

Mr. Chairman and Members of the Subcommittee:

Thank you for the opportunity to discuss with you this morning the merits of reauthorization of the Alcohol and Drug Abuse Education Program of the Office of Education.

As President of the Alcohol and Drug Problems Association of North America (ADPA), I am privileged to speak on behalf of the more than 200 agencies throughout the nation both public and private, profit and non-profit - and approximately 2,000 professional workers in this field of endeavor who represent the full range of effort and interest in working for the reduction of alcohol and drug related harm. One of the fifteen Special Interest Sections of ADPA is the Education Section, comprised of teachers and others with interest in the gamut of educational needs about alcohol and other drugs, alcoholism and drug dependence. ADPA was founded in 1949 by state alcoholism program directors.

For any health or human need problem, public support is necessary for public programming. Natural progression is for public recognition and legislative support for treatment, research, etc., for which delivery systems are put in place. This inevitably is followed by recognition of the need, support and demand for prevention programs by public policy makers.

We are now in the era of prevention in the alcohol and drug problems field.

President Carter pointed this out during the 1976 campaign when he said ". . . .we now must expand our vision to include far-sighted and well conceived programs aimed at the prevention of alcohol and drug misuse. Prevention is a most important factor in the equation of comprehensive programming, and it deserves major emphasis by all of us." Other federal authorities and Congressmen have made similar statements.

We in the field of alcohol and drug problems are deeply appreciative of the Congress and of this Subcommittee for its early recognition of the importance of the schools' role in prevention, when in 1970 you passed the Alcohol and Drug Abuse Education Act. This Act provides the basis for a sound prevention approach. Despite the drastically curtailed appropriation of $2 million annually since FY '77, against a barely adequate authorization of $34 million, the ADAEP, under the far sighted leadership of its director, Dr. Helen Nowlis, has made significant progress. Reports of the results of "School Team efforts" from a variety of communities, such as Antonito, Colorado; Ripley, Oklahoma; Aberdeen, South Dakota; Willow Run, Michigan; Gary, Indiana and Reno, Nevada, are indeed encouraging.

Collectively in these cases problems related to alcohol and drug misuse have been greatly reduced, while positive attitudes have resulted in increased recreational opportunities and alternative vocational and avocational instruction.

Efforts at prevention for such massive and complex problems as those related to alcohol and drug misuse necessarily must be far ranging and must involve all sectors of society. Schools are a focal point in aggravating or in solving many problems involving students. Schools and other educational groups are the natural constituency of the Office of Education. OE has access to and credibility with this important constituency that no other agencies have. Schools have more access to more parents than any other system and parents must be a major part of the process.

Since its inception in 1970 the Office of Education program has operated on the assumption that promotion of positive physical, psychological and social growth and development is the best approach to preventing destructive behavior. Initially, this was neither understood nor supported. Within the past several years, however, it has been widely accepted around the country and within the Administration. We applaud this approach and feel that it should be thoroughly explored and implemented, along with other alcohol and drug prevention efforts of other agencies, including some that are alcohol and drug specific.

We urge that the Alcohol and Drug Abuse Education Program be extended for at least an additional three years and that it remain within the Office of Education. Because of the increasing demands for prevention programs in this area of concern, we further recommend that more adequate funding be authorized to provide:

1) full implementation of ADAEP programs. It now is restricted to programs in the urban centers. Thus, the rural sector and a vast number of Americans are not being exposed to this important part of the national prevention strategy;
2) a comprehensive program of evaluation to demonstrate the effectiveness of ADAEP programs.

Thank you, Mr. Chairman.

Mr. BIAGGI. Thank you. Mr. Forbes?

Mr. FORBES. I will be extremely brief. I am not appearing today in my capacity as Director of the National Assessment of Educational Progress, but as an individual supporter of the Alcohol and Drug Abuse Education Act. I have had the opportunity to work with this program for several years while I was in the Louisville, Ky., Educational Center. In my present capacity, I have donated my time to assisting in the efforts of the program.

Common sense of the program, that is, attempts to treat causes of abuse rather than reacting to the results of abuse, is what drew me to the program, and what maintained my interest and support over these years. Other programs have been aimed at providing students with information about the dangerous effects of alcohol and drug abuse. Some of them obviously are contributing to an increase in student knowledge.

For some of the information that we collect through the National Assessment, we found, for instance, that 90 percent of the Nation's 17-year-old students knew that alcohol repressed the body's functions, and then 90 to 96 percent knew that continuous and heavy use of alcohol causes damage to the liver and brain, but has increased knowledge of the dangers of alcohol and drug abuse resulted in solving the problems of abuse? Apparently not, because the incidences of abuse remain high.

I believe we need to focus more effort on programs designed to treat the causes of abuse. We need to help students understand their problems, their values, their goals in life. They need tc be taught to recognize that different courses of action are open to them, and how to select the most appropriate and self-fulfilling course that matches their own individual needs.

These skills are essential if we expect students not to follow paths ofself-destruction. The efforts of the alcohol and drug abuse education program are to be applauded in this area. Small sums of money have effectively been utilized to reach many students and educators. I strongly support legislation both at the authorizing and appropriations leve which will enable these efforts to continue.

Another point, the Education Commission of the States, the organization for which I work, recently completed a 3½-year study to determine what policies are necessary to reduce the incidence of alcohol abuse and alcoholism. Bennet Cates, a State senator from Maine and vice chairman of the Education Commission of the States Task Force responsible for the study, has submitted by letter copies of the group's findings to this subcommittee.

In his letter, Senator Cates urges that preventive educational approaches become a priority.

I recommend your subcommittee consider the ECS Task Force report. I totally agree with the emphasis placed on the preventive education approach which is consistent with the past and present efforts of the U.S. Office of Education's alcohol and drug abuse education program. Thank you, Mr. Chairman.

[Statement by Roy Forbes follows:]

Statement of Dr. Roy H. Forbes, Director, National Assessment of Educational Progress, Education Commission of the States

I am appearing today not in my capacity as the Director of the National Assessment of Educational Progress, but as an individual supporter of the Alcohol and Drug Abuse Education Act.

I have had the opportunity to work with the U. S. Office of Education Alcohol and Drug Abuse Program over the past several years. While I was with the Louisville (Kentucky) Urban Education Center, I worked with this program as a consultant for three years; since becoming director of National Assessment, I have contributed my time in assisting the efforts of this program.

The "common sense" approach of this program, which attempts to treat the causes for abuse rather than simply reacting to the results of abuse, was the unique feature which originally drew me to the program and which maintained my interest and support over the years. Other programs have been aimed at providing students with information about the dangers and effects of alcohol and drug abuse. Some of these programs may be contributing to an increase in students' knowledge about the dangers of alcohol and drug abuse. In a survey conducted during the spring of 1977, National Assessment found that 90% of the nation's 17-year-old students knew that alcohol depressed the body's functioning and 96% knew that continuous and heavy use of alcohol causes damage to the

liver and brain. In addition, four-fifths of the teenage students knew that "speed", "uppers", or dexedrine resulted in overactivity and jitteriness, and two-thirds knew that increasing amounts of speed were needed to maintain a person's level of energy.

But has increased knowledge of the dangers of alcohol and drug abuse resulted in solving the critical problems of abuse? Apparently not, for the incidences of abuse remain high.

I believe that we need to focus more effort on programs designed to treat the causes of abuse. We need to help students understand their problems, their values, and their goals in life; they need to be taught to recognize that different courses of action are open to them and how to select the most appropriate and self-fulfilling course that matches their own individual needs. These skills are essential if we expect students to not follow paths of self destruction.

The efforts of the Alcohol and Drug Abuse Education Program are to be applauded in this area. Small sums of money have been effectively utilized to reach many students and educators. I strongly support legislation, both authorization and appropriation, which will enable these efforts to continue.

The Education Commission of the States (ECS), the organization with which the National Center for Education Statistics contracts to conduct the National Assessment of Educational Progress and for which I work, has recently completed a three and a half year study to determine what policies are necessary to reduce the incidence of alcohol abuse and alcoholism. Bennett D. Katz,

State Senator from Maine and vice-chairman of the ECS Task Force responsible for this study, has submitted by letter copies of the group's findings to your subcommittee. In his letter, Senator Katz urges that preventative educational approaches become a priority. I recommend that your subcommittee consider the ECS Task Force's report. I totally agree with the emphasis placed upon the preventative educational approach, which is consistent with the past and present efforts of the U. S. Office of Education Alcohol and Drug Abuse Education Program.

Thank you, Mr. Chairman.

Mr. BIAGGI. Mr. Jackson?

Mr. JACKSON. Mr. Biaggi, members of the Subcommittee on Select Education, it is indeed an honor to have this opportunity to appear before you during your consideration of the extension of the Alcohol and Drug Abuse Education Act. It is also my hope that the testimony I will provide to this committee will provide a perspective on the activities of the alcohol and drug abuse education program that will result in an affirmative decision relative to the recommendations of Dr. Nowlis.

In my judgment, the activities conducted by the Office of Education's alcohol and drug abuse education program under this act have been nothing less than exemplary. This judgment is based on my experience as an educator, teacher, and counselor trainer, director of the University of Massachusetts juvenile justice program, consultant to drug abuse prevention programs, and a variety of other related activities. It is also based on an understanding of the nature and complexity of the issues being addressed by this program.

After much investigation, it is my belief that the satisfaction gained from chemically induced experiences or from engaging in other forms of personally or socially destructive behavior, for example drug abuse and delinquency, can appear to provide a type of answer for a broad spectrum of human needs and concerns. From this perspective then, the recognition that various forms of destructive behavior are only symptoms, requires a prevention program that can address the real problem.

Generally speaking, the problem behind the many forms of destructive behavior can be described as unmet human needs. Specifically, the needs are for a positive sense of self or identity, a sense of connectedness with one's environment, and a sense of power or fate control. Only by providing processes that enable people to address these needs can we hope to remove the pressures that can cause one to choose one of the many forms of destructive behavior.

Having a set of goals and objectives that address the problem is just the first step. Of equal importance is the selection of an appropriate intervention process and strategy for delivery. It has been my experience that education and training are far more appropriate than moralizing, punishing, or treating. By expanding our concept of education to include and legitimize the personal needs and concerns that we all experience, then and only then can we hope to prevent the destructive behavior that one can be forced to resort to in order to get those human needs and concerns met.

Along with the selection of an appropriate process for achieving the desired ends, one must also design a strategy for restructuring the learning environment so that it is conducive to growth and able to be responsive to diverse human needs. More specifically, the strategy must enable school systems and school personnel to develop and maintain a nurturing climate for students, teachers, and administrators. This can only be accomplished when the blocks to a healthy climate are removed and replaced with the necessary incentives and supports.

Stated in general terms, the above represents the perspectives and operational components I believe to be necessary for the development and implementation of a prevention program that addresses the many forms of destructive behavior. It also describes the extremely challenging scope of work that the U.S. Office of Education, alcohol and drug abuse education program, is attempting to address.

This program, through its inservice and preservice training programs, has, with limited resources, directly and indirectly had a significant impact on literally thousands of students. The program has done this by, one, introducing humanistic concepts and teaching methods to hundreds of teachers, counselors, and students; two, training teachers, counselors, and administrators in the design and implementation of humanistic curricula in their schools; three, providing technical assistance to schools starting programs of their own; four, providing the necessary ongoing support systems to trainees using team building techniques; and five, instituting changes in teacher training institutions which will better prepare teachers to promote positive growth and development.

In addition, the program is in its second year of implementation of a cluster concept. This concept calls for the grouping of three to five teams from a given location to form a larger support network for change. The program is also involved in an extensive evaluation process of its training efforts. It is expected from all initial indicators that the results will clearly support the positive impact that the program has had on reducing destructive behavior in participating school districts.

Although the results from the program's evaluation are not in yet, I can report on the success of the program based on my visits to schools around the country as well as from discussions with students, teachers, counselors, and administrators who have participated in the program's training activities. Specifically, I would like to report on just a few indicators of success.

Students, teachers, counselors, and administrators have reported that their schools are in fact better places to work and learn.

Students have expressed an increased awareness of alternatives for dealing with their growth and development concerns as well as with their frustrations.

Participating schools seem to be better able to address both traditional subject areas and student concerns using creative techniques that are growthful for all concerned.

Educators and students have found that the training that they have received from program-related activities has enabled them to address a wide variety of social ills that have caused students to resort to destructive behavior.

In closing, I would like to say that one of the most significant outcomes of the program's activities for me is its positive impact on the frontline victims of destructive behavior patterns. Examples from that to me are, quote, end quote, minorities, women, the poor, the young, and the aged. Thank you.

[Prepared testimony by Bailey Jackson III follows:]

TESTIMONY SUBMITTED BY BAILEY W. JACKSON III, ASSISTANT PROFESSOR, SCHOOL OF EDUCATION, UNIVERSITY OF MASSACHUSETTS

Chairman Brademas and members of the Subcommittee on Select Education, it is an honor to have the opportunity to appear before you during your consideration of the extension of the Alcohol and Drug Abuse Education Act. It is my hope that my testimony will provide this Committee with a perspective on the activities of the Alcohol and Drug Abuse Education Program (ADAEP) that will result in an affirmative decision. Relative to the recommendations made by Dr. Nowlis.

In my judgment the activities conducted by the Office of Education's Alcohol and Drug Abuse Education Program under this act have been nothing less than exemplary. This judgment is based on my experience as an educator, teacher and counselor trainer, Director of the University of Massachusetts Juvenile Justice

Program, consultant to drug abuse prevention programs, and a variety of other related activities. It is also based on an understanding of the nature and complexity of the issues being addressed by this Program.

After much investigation, it is my belief that the satisfaction gained from chemically induced experiences or from engaging in other forms of personally or socially destructive behavior is usually relative to the level of satisfaction or frustration in a person's life experiences. The various forms of destructive behavior (e.g., drug abuse and delinquency) can appear to provide a type of answer for a broad spectrum of human needs and concerns. From this perspective then, the recognition that various forms of destructive behavior are only symptoms, requires a prevention program that can address the real problem.

Generally speaking, the problem behind the many forms of destructive behavior can be described as unmet human needs. Specifically, the needs are for a positive sense of self or identity, a sense of connectedness with one's environment, and a sense of power or fate control. Only by providing processes that enable people to address these needs can we hope to remove the pressures that can cause one to choose one of the many forms of destructive behavior.

Having a set of goals and objectives that address the problem is just the first step. Of equal importance is the selection of an appropriate intervention process and strategy for delivery. It has been my experience that education and training are far more appropriate than moralising, punishing, or treating. By expanding our concept of education to include and legitimize the personal needs and concerns that we all experience, then and only then we can hope to prevent the destructive behavior that one can be forced to resort to in order to get those human needs and concerns met.

Along with the selection of an appropriate process for achieving the desired ends, one must also design a strategy for restructuring the learning environment so that it is conducive to growth and able to be responsive to diverse human needs. More specifically, the strategy must enable school systems and school personnel to develop and maintain a nurturing climate for students, teachers and administrators. This can only be accomplished when the blocks to a healthy climate are removed and replaced with the necessary incentives and supports.

Stated in general terms, the above represents the perspectives and operational components I believe to be necessary for the development and implementation of a prevention program that addresses the many forms of destructive behavior. It also describes the extremely challenging scope of work of United States Office of Education-Alcohol and Drug Abuse Education.

The ADAEP, through its in-service and pre-service training programs, has, with limited resources, directly and indirectly had a significant impact on literally thousands of students. The program has done this by (1) introducing humanistic concepts and teaching methods to hundreds of teachers, counselors and students, (2) training teachers, counselors and administrators in the design and implementation of humanistic curricula in their schools, (3) providing technical assistance to schools starting programs of their own, (4) providing the necessary ongoing support systems to trainees using team building techniques, and (5) instituting changes in teacher training institutions which will better prepare teachers to promote positive growth and development.

In addition, the Program is in its second year of implementation of a cluster concept. This concept calls for the grouping of 3–5 teams from a given location to form a larger support network for change. The Program is also involved in an extensive evaluation process of its training efforts. It is expected from all initial indicators that the results will clearly support the positive impact that the Program has had on reducing destructive behavior in participating school districts.

Although the results from the Program's evaluation are not in yet, I can report on the success of the Program based on my visits to schools around the country as well as from discussions with students, teachers, counselors and administrators who have participated in the Program's training activities. Specifically, I would like to report on just a few indicators of success:

1. Students, teachers, counselors and administrators have reported that their schools are in fact better places to work and learn.
2. Students have expressed an increased awareness of alternatives for dealing with their growth and development concerns as well as with their frustrations.
3. Participating schools seem to be better able to address both traditional subject areas and student concerns using creative techniques that are growthful for all concerned.
4. Educators and students have found that the training that they have received from Program related activities has enabled them to address a wide variety of

social ills that have caused students to resort to destructive behavior. In closing, I would like to say that one of the most significant outcomes of the Program's activities for me is its positive impact on the front line victims of destructive behavior patterns (drug abuse, alcoholism aud delinquency), e.g. 'minorities", women, the poor, the young and the aged.

Thank you.

Mr. BIAGGI. Thank you for your testimony in support of the program. Obviously, you know the sentiment of this committee. We have authorized $34 million in the last session, and I agree that appropriating $2 million is hardly a fair response.

The chairman has indicated his strong support, and I think he is a little disappointed at the $2 million also. From testimony we have listened to so far today, there has been some evidence that it is working. It could work more effectively. We also know that the problem continues unabated. Unless we try something new or give it a fair shot, we will be plagued with the problem as infinitum. Mr. Pressler?

Mr. PRESSLER. Yes, I have just a couple of questions, but first of all I want to commend the witnesses on their testimony. I do want to get this point into the record. Maybe I should be submitting it over in one of the agencies very briefly, but we did have mention of reaching some of the rural and small town areas. I am very interested in your philosophy of drug and alcohol abuse prevention, and I have heard good reports from two schools in my district, Ellsworth and Aberdeen, regarding the use of teams in the schools. However, in checking either the Division of Alcoholism or the Division of Drug Abuse in South Dakota, which are the main State coordinating agencies for education in these areas, neither have taken advantage of the programs. That might be our fault, but it is my understanding this is because they are not aware of what services are available.

Perhaps this is not the proper place, but what could be done to let the States and public know about the drug abuse and alcohol prevention programs? The South Dakota Division of Drug Abuse noted it was difficult to get prompt responses from the Region 5 Center in Chicago when they wanted to set up training courses. This may be a problem of staffing, but the question seems to be, how can some of the smaller State drug and alcohol preventing agencies better communicate on these matters?

Maybe this is not a fair question for this group, but I will be submitting these questions in writing to the agency, and maybe one of you would want to respond.

Mr. BUTYNSKI. When I was State director in Vermont, we in fact worked with the State director in South Dakota, and a number of other States, trying to establish a task force of rural State directors, in trying to in fact encourage attention to those needs. Now, in terms of this act, there certainly has been some attention to rural needs. However, most of it has been in the past. Although the new concept of clusters is in fact encouraging for the positive things it can do for urban areas, in fact, as I understand the guidelines, because of the population needed to qualify for clusters, many of the smaller States and rural areas are not able to get the services they need.

Thus, there needs to be some expansion of services to rural areas. In terms of communication, I think in the past there have been some difficulties, both within the Administration as well as at the State level between individuals located in the U.S. Office of Education or the

State Department of Education, the NIAAA, the State Alcohol Authority, or NIDA, the State Drug Authority. It seems it might be worth this committee recommending to all three of those agencies at the Federal level, NIDA, NIAAA, and OE, that there should and could be greater communication, cooperation, and coordination.

I certainly know that Dr. Nowlis and some of the other representatives do meet occasionally, and yet it seems that it might be helpful to reinforce them in that joint effort, and in terms of looking at how they can learn from one another, so that I fully support the questions. They do need to be addressed, and the human factor gives some mandate to the Federal agencies to do more in terms of coordination. That would also help at the State level.

Mr. BIAGGI. Thank you very much for your testimony. The meeting is adjourned.

[Whereupon, at 12:20 p.m., the subcommittee was adjourned.]

APPENDIX

U.S. DEPARTMENT OF JUSTICE,
OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION,
Washington, D.C., April 13, 1978.

Hon. JOHN BRADEMAS,
Chairman, Subcommittee on Select Education, Committee on Education and Labor, U.S. House of Representatives, Washington, D.C.

DEAR MR. CHAIRMAN: I would like to make some additional comments regarding the Office of Juvenile Justice and Delinquency Prevention's relationship to the Office of Education in the prevention of school violence and vandalism.

During the hearing of the Subcommittee on Select Education of the Committee on Education and Labor on January 24, 1978, the following excerpt from Dr. Thomas K. Minter's prepared statement was presented concerning the current interagency agreement between OJJDP–LEAA and OE–HEW.

"On the basis of repeated reports that successful alcohol and drug abuse prevention programs often reduce vandalism, drop-outs, truancy, racial conflict, disciplinary problems and other destructive behavior, the Office of Juvenile Justice and Delinquency Prevention in the Law Enforcement Assistance Administration suggested a cooperative effort with the Alcohol and Drug Abuse Education Program utilizing its system and strategies on the problem of prevention of school crime and violence. The Office of Juvenile Justice provided $1,233 million in FY '76 and $2.8 million for FY '77–'78 for this effort. Training and technical assistance were provided to seven-member teams from 81 schools in January and February of 1977 under an interagency agreement. In November 1977 this was extended to support the training of 35 clusters of four school teams (130 teams) from major urban school districts in the 77–78 school year and an additional 20 clusters (80 teams) in the '78–'79 school year."

This accurately summarizes our involvement, however, I would like to make some specific comments.

We expanded school teams from five to seven members to allow participation of a youth, and representation of a person from school security and the juvenile justice system.

We expanded the technical assistance effort from one year to two years to provide more intensive assistance to local school teams in implementing and refining crime prevention programs. We are also supporting an independent evaluation of this approach to determine its impact on school crime and violence, which is currently being conducted by the Social Action Research Center.

I hope these comments concerning the interagency agreement are helpful to the Subcommittee. If I can be of any further assistance, please contact me.

With warm regards,

JOHN M. RECTOR,
Administrator, Office of Juvenile Justice and Delinquency Prevention.

UNIVERSITY OF CALIFORNIA, SANTA CRUZ,
Santa Cruz, Calif., January 23, 1978.

Congressman JOHN BRADEMAS,
Select Education Subcommittee, Rayburn Office Building, Washington, D.C.

SELECT EDUCATION SUBCOMMITTEE:

As I was not able to personally testify before your committee as planned on Tuesday, January 24, please find my testimony enclosed. Please include it in the Congressional Records for consideration before drafting new legislation.

I would also very much appreciate a copy of the record in which this testimony appears.

Thank you very much.

Sincerely,

JOE BERNEY.

TESTIMONY

My name is Joe Berney. I am currently employed at Soquel High School. I am one of four voting faculty members who sits on the School Site Council at Soquel, a group charged with the responsibility of developing a comprehensive School Improvement Plan for our school as required by California's AB 65. I am currently developing high school economics curriculum with Dr. Arthur Pearl, which addresses the global crises of war, racism, poverty, environmental depletion and destruction, and decreasing government credibility to many young people. I can honestly say that the motivating factor for all these involvements, as well as my presence at the school, is a direct consequence of my involvement with the O.E. funded Drug Education Program at UC, Santa Cruz.

Obviously I am a strong believer in the need for legislation which funds a variety of programs for preventing substance abuse in schools with components in them similar to Santa Cruz Program. I would like to address that concern in this testimony. I was originally scheduled to testify before this select subcommittee. While I understand the logistical reasons for time constraints which will prevent the committee from personally hearing my testimony and responding with questions, I believe it to be crucial to consider the concerns and position this paper advances.

I want to address to four main points:

1. A theoretical stance on youth alienation and delinquent activities;
2. Description of the Santa Cruz Program;
3. Results:
4. Implications for Legislation (the types of experimental programs which need to be funded.

The theoretical perspective on alienation in schools that leads to dellnquent behavior and substance abuse which was advanced by the Snata Cruz Program, a perpective which has guided my activities and whose results appeal to its success, can be summarized as follows:

"From the user's view, drug use is neither pathological nor abhorrent; the user is neither sick nor stupid. To the contrary, drug use is seen as logical and gratifying within the social context of the user. Thus an effective program must alter context, must change the relationship of the individual to the society by generating opportunities for people to be a part of the system. From this perspective, persuading or coercing students merely to refrain from using drugs is futile and brutal; rather, an effective program must substitute for drug usage—or other self or socially destructive behaviors—socially constructive and personally gratifying activities that do not require the use of drugs."

The important theme here is that people behave in ways which fulfill basic psychological needs. The assumption is that human decision-making in all life arenas is rational and conscious. Students choose to become involved in drugs because the benefits for them outweigh the costs. Conversely, they do not become nice, conforming citizens because the costs of those behaviors outweigh the benefits.

"The UCSC program identified eight gratifications that underlie all human endeavor: security, comfort, meaning, belonging, usefulness, competence, hope, and excitement. Unless students obtain a measure of these gratifications through socially desired behavior, they will avoid such behavior; conversely, the more students obtain these gratifications from drug use or other proscribed behaviors, the more difficult it is to discourage their use. To reduce the alienation of the individual, it is essential that projects and activities be initiated to provide gratifications where there is now only frustration."

"Since our society offers few opportunities for the investment of energy within the system, the only options available for many young people are asocial and antisocial behavior. Drug use may offer other kinds of security; for example, poor youths who are deprived of a legal means of obtaining economic security may see drug trafficking as a way to rapid accumulation of wealth and also to "social security," participation in a "community," access to power, and protection that is not otherwise available to them. Schools can be miserable, painful, unfriendly places; drugs can be comforting, drugs can relieve pain. About the only change we have seen in student drug use in recent years has been a periodic shifting in their choice of drugs; students appear to be drifting back to alcohol and away from heroin for anesthetization."

"The failure to address in any meaningful way the primary economic, political, and cultural institutions in our society can lead to distortion of reality, disillusionment, and epidemics of substance abuse and violence. Yet school authorities are unwilling and, in most cases, unable to conceptualize a school which is totally integrated into society."

DESCRIPTION OF UCSC DRUG EDUCATION PROGRAM

In a nutshell, the UCSC Drug Education Program urged its students to:

1. Analyze pupil behavior;
2. Assess existing gratification systems;
3. Generate projects which provided for pupils, especially alienated youth, psychological gratifications;
4. Generate curriculum and projects which would strengthen bonds between the student's school life and other life arenas of:
   (a) Work situations.
   (b) Family life.
   (c) Cultural activities.
   (d) Political agencies.

The UCSC Program attempted to provide a program to its university students where concerns and ideas could then be translated into the public school sites where university students worked as teams eight to ten hours per week.

Results

This program gave those of us who were involved in it, as university students, an element I have found unique in my three years as a high school teacher. Our presence in schools is a direct result of our social responsibility and community commitment. Our impact extends far beyond our classroom and our theory directs us to develop relevant curriculum and involve ourselves in policy decisions, always mindful of the substance abuser as a rational actor in the school environment.

In interviews with key Santa Cruz and Watsonville educators at the seven school locations and program placed students, I found unanimous agreement that as a result of the presence of UCSC students involved in this program: 1) The problems of alienated youth have been brought to the attention of schools, 2) Relevant and needed school projects implemented by UCSC students and their public school students would not have otherwise been available to those youths.

Some examples of programs implemented due to the UCSC Drug Education Program are:

1. Project HOLD—a program in the Watsonville High School to keep pupils from dropping out before graduation;
2. The Group Dynamics Class—now an established part of the Watsonville High School curriculum;
3. The Watsonville bilingual-multicultural program sponsored under the Emergency School Aid Act (ESAA);
4. The Student Rights and Responsibilities Project now incorporated in Santa Cruz School Board of Education policy;
5. The alternative high school in Santa Cruz, now under the direction of a UCSC program graduate;
6. Cinco de Mayo celebrations and cross-age tutoring at Watsonville High School;
7. A Students-Working-For-Students group which is so popular it is now an established course offered in the Social Studies Department at Soquel High School.

Again, all these are examples of addressing alienation by changing the school context to better provide personally and socially constructive opportunities for gratification. They recognize the fact that substance abuse does not disappear through increased enforcement. It does not decrease by coming down hard on symptoms. It does decrease and disappear when gratification systems exist in school life and bonds are strengthened between the school experience and the arenas of life.

OTHER RESULTS DEMONSTRATING VALUE OF THE PROGRAM

"After three years of project operation, 110 students have participated in the project; 44 have received their teaching credentials. Of the 34 who graduated in 1975 and 1976, 20 are employed as teachers and 10 are in graduate school."

IMPLICATIONS FOR LEGISLATION

This select committee has now the opportunity to draft legislation which can benefit university programs and potential teachers, public schools, substance abusers and school-community bonds.

Programs funded should, in their lectures, supervision, seminars, and field experiences, include:

1. Development of an intellectual presence:
The teacher with an intellectual presence provides reasons for existing laws and regulations and guidelines for persons who wish to change the system. Without such a presence, it is impossible to understand alienation. Without understanding, finding remedies is also impossible.
2. A dedication to working with alienated youth in a field experience.
3. Development of educational projects in the field:
Tangible projects whose outcomes people can feel, see, or touch allow participants to evaluate the importance of the activity. Projects should:
(a) Address real problems;
(b) Identify resources to help those who are confined or scared;
(c) Define each person's responsibility;
(d) Build interdependency into successful outcomes.
Such projects will build in gratifications for participants which can realistically compete with delinquent activities.
4. Community Involvement:
For schools to be more relevant, school-community relations must be changed. Projects should be designed to involve:
(a) Private employers.
(b) Government officials.
(c) Senior citizens.
(d) Parents.
5. Pluralism:
Projects should actively try to bring together antagonistic groups and generate feelings of competence, belongingness, and usefulness across historical divisions. This should be reflected in:
(a) Staffing;
(b) Recruitment of university students;
(c) Curriculum development;
(d) Project.
I urge this committee to include these five components in the operations of future university and public school-based programs it funds for the purposes of funding substance abuse among the nation's youth.
Thank you for your consideration.

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*All the quotes were taken from an article entitled, "The Drug Education Program," by Arthur Pearl.